

**St. Gregory’s Catholic High School**

**Allergen and Anaphylaxis**

**Policy**

**Monitoring**

The implementation of the policy will be monitored by the Deputy Headteacher (Pastoral)

# Evaluation

The policy was reviewed by the Deputy Headteacher (Pastoral) and SLT on 13th June 2022 prior to the submission of the policy to Governors’ Community Committee for scrutiny and recommendation to the Full Governing Board for approval.

**Policy Review Dates:**

**Date last approved by Full Governors:** 13th July 2021

**Date submitted to Governors Committee:** 23rd June 2022

**Date submitted to Full Governing Board:** 13th July 2022

**Review Frequency:** Annually

**Start date for policy review:** March 2023

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**Statement of Intent**

St Gregory’s Catholic 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 pupils, 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 legislation and government guidance including, but not limited to, the following:

* The Children and Families Act 2014
* The Human Medicines (Amendment) Regulations 2017
* The Food Information (Amendment) (England) Regulations 2019 (Natasha’s Law)
* Department of Health (2017) ‘Guidance on the use of adrenaline auto-injectors in schools’
* DfE (2015) ‘Supporting pupils at school with medical conditions’

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

* Health and Safety Policy
* Medical Policy
* Educational Visits and School 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 out of the mouth
* Burning sensation in the mouth
* Swelling of the throat, mouth or face
* Feeling wheezy
* Abdominal pain
* Rising anxiety
* Nausea and vomiting
* Alternations in heart rate
* Feeling of weakness
* Anaphylaxis – is also referred to as an anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:
* Difficulty breathing
* Feeling faint
* Reduced level of consciousness
* Lips turning blue
* Collapsing
* Becoming unresponsive

**3. Roles and responsibilities**

The Governing Board are responsible for:

* Ensuring that arrangements are in place to support pupils with allergies and who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities
* Ensuring that policies, plans, systems and procedures are implemented to minimise the risks of pupils suffering allergic reactions or anaphylaxis at school
* Ensuring that the school’s approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual pupil
* Ensuring that the school’s arrangements give parents and pupils confidence in the school’s ability to minimise susceptible pupils’ contact with allergens, and to effectively support pupils should an allergic reaction or anaphylaxis occur
* Ensuring that staff are properly trained to provide the support that pupils 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 pupil experiences an allergic reaction

The Headteacher is responsible for:

* The development, implementation and monitoring of the Allergen and Anaphylaxis Policy
* Ensuring that parents are informed of their responsibilities in relation to their child’s allergies
* Ensuring that all school trips are planned in accordance with the Educational Visits and Trips Policy, taking into account any potential risks the activities involved pose to pupils with known allergies
* Ensuring that the sourcing of food is from reputable suppliers and that all allergens are clearly identified on labels
* 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 designated first aiders 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 anaphylaxis, as well as the necessary precautions and actions to take
* Ensuring that catering staff are aware of, and act in accordance with, the school policies regarding food hygiene, including this policy
* Ensuring that catering staff are aware of any pupils’ allergies which may affect the school meals provided

All school members are responsible for:

* Acting in accordance with the school policies and procedures at all times
* Attending relevant training regarding allergens and anaphylaxis
* Being familiar with and implementing pupil's individual healthcare plans 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
* Monitoring all food supplied to pupils by the school, including snacks, ensuring food containing known allergens is not provided
* Ensuring that any necessary medication is out of the reach of pupils but still easily accessible to staff member
* Liaising with the school nurse and pupils' parents to ensure the necessary control measures are in place

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
* Actin on entries to the allergen incident log and ensuring the risks of recurrence are minimised

The Kitchen staff are responsible for:

* Ensuring that they are fully aware of the rules surrounding allergens, the processes for food preparation in line with section 4 and section 5 of this policy, and the processes for identifying pupils with specific dietary requirements
* Ensuring that 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 are responsible for:

* Notifying the school of the following information:
  + 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
* 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 up to date emergency contact information
* Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor
* Providing the school with any necessary medication, in line with the procedures outlines in the Medical Policy
* Communicating to the school any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen
* Providing the school, in writing, any details regarding the child's allergies
* Working alongside the school to develop an Healthcare Plan to accommodate the child's needs, as well as undertaking the necessary risk assessments
* Signing their child's Healthcare Plan where required
* Acting in accordance with any allergy related requests made by the school, such as providing safe items in their child’s packed lunch
* Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react
* Raising any concerns they may have about the management of their child's allergies with the Pastoral Manager for their child’s year group
* Ensuring that any food their child brings to school is safe for them to consume
* Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided

All pupils are responsible for:

* Ensuring that they do not exchange food with other pupils
* Avoiding food which they know they are allergic to, as well as any food with unknown ingredients
* Being proactive in the care and management of their allergies
* Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown
* Notifying a member of staff when they believe they may have come into contact with something containing an allergen
* Learning to recognise personal symptoms of an allergic reaction
* Keeping necessary mediations in an agreed location that members of staff are aware of
* Developing greater independence in keeping themselves safe from allergens
* Notifying a staff member if they are being bullied or harassed as a result of their allergies

**4. Food Allergies**

Parents 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 pupils 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 kitchen.

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

* Checking any product changes will 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 meal
* 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 section 5 of 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 pupils with allergies and intolerances.

Where a pupil who attends the school has a nut allergy, the school will follow the process of:

* Requesting that the school kitchen eliminates nuts, and food items with nuts as ingredients, from meals as far as possible
* Ensuring that food items containing nuts will not be served at, or be brought onto, school premises
* Maintaining an allergy log and ensuring staff know where it can be located.

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

Anti-bacterial wipes and 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 clothes 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 meats, to prevent cross-contamination.

There will be a set of kitchen utensils that are only for use the food and drink of the pupil 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 kitchen will be 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 pupils’ IHPs, taking into account any known allergies of the pupils involved.

**5. Food Allergen Labelling**

From 1st October 2021, the school will adhere to new 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, and 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

6. Food labelling

Food goods classed as ‘pre-packed for direct sales’ (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, eg 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, upon delivery, in a food allergen log stored in the kitchen
* 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 log and managed by the kitchen manager

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 immediate, 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 an anomalies.

Changes to ingredients and food packaging

The school 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 an updated as soon as possible.

6. Animal Allergies

Pupils 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 pupils to whom this may pose a risk and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

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

A supply of antihistamine tablets will be kept in the First Aid Room in case of an allergic reaction

**6. Seasonal allergies**

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

Precautions regarding the prevention of seasonal allergies include ensuring that the school field is not mown whilst pupils are outside.

Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes, in avoiding contact with outside allergens.

Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

Pupils will be encouraged to wash their hands after being outside.

Pupils with known seasonal allergies are encouraged to bring an additional set of closing to school to change into after being outside, with the aim of reducing contact with outdoor allergens, such as pollen.

Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the schools nearby proximity, reporting any concerns to the site manager.

The site manager is responsible for ensuring the appropriate removal of wash, bee and ant nests on and around the school premises.

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

**7. Adrenaline auto-injectors**

Pupils 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 prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working

The school may purchase spare AAIs from a pharmaceutical supplier

The school will submit a request, signed by the Headteacher when purchasing AAIs which states:

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

The headteacher, in conjunction with the school nurse will advise the school which brands of AAI to purchase.

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

The school will purchase AAIs in accordance with age-based criteria as follow:

* For pupils aged 6-12: 0.3 milligrams of adrenaline
* For pupils aged 12+: 0.3 or 0.5 milligrams of adrenaline

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
* Instructions on the storage of the device
* Manufacturers information
* A checklist of injectors, identified by the batch number and expiry date, alongside records or monthly checks
* A note of the arrangements of replacing the injectors
* A list of pupils to whom the AAI can be administered
* An administration record

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

Spare AAIs are not located more than 5 minutes away from where they may be required. The emergency anaphylaxis kit can be found at reception.

All staff have access to AAI devices but they are out of reach and inaccessible to pupils, 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 pupil.

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

The site staff are responsible for maintaining the anaphylaxis kit and carrying out a monthly check to ensure the devices have not expired.

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 Section 12.

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 with be recorded on the AAI record:

* Where and when the reaction took place
* How much medication was given and by whom

**8. Access to spare AAI**

A spare AAI can be administered as a substitute for a pupils own prescribed AAI, if this cannot be administered correctly, without delay

Spare AAIs are only accessible to pupils for whom medical authorisation and written parental consent has been provided – this includes pupils at risk of anaphylaxis who have been provided with a Healthcare 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 pupils Healthcare Plan.

If consent has been given to administer a spare AAI to a pupil, this will be recorded in their Healthcare Plan.

The school uses a register to record to whom spare AAIs can be administered – this includes the following:

* Name
* Class
* Known allergens
* Risk factors for anaphylaxis
* Whether medical authorisation has been received
  + Whether written parental consent has been received
* Dosage requirements

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

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

A copy of the register is held on the ‘One Drive’ to be accessible to all staff members which will be updated by the Headteachers PA to register any relevant changes or consent.

**9. Medical attention and required support**

Once a pupils allergies have been identified, a meeting will be set up between the pupils parents, the relevant classroom teacher, the school nurse and any other relevant staff members, in which the pupils 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 Medical Policy.

Parents will provide the school with any necessary medication, ensuring that his is clearly labelled with instructions for administering it.

Pupils 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 involved with a pupil with a known allergy 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 a pupil may require is outlined in their Healthcare Plan.

All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupils Healthcare Plan.

The SENDCo is responsible for working alongside relevant staff members and parents in order to develop Healthcare Plans for pupils with allergies, ensuring that any necessary support is provided and the relevant documentation is completed, including risk assessments being undertaken.

The SENDCo has overall responsibility for ensuring that health plans are implemented, monitored an communicated to the relevant members of the school community.

**10. Staff training**

Designated 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 Medical Policy, staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The school will arrange specialist training where a pupil in the school has been diagnosed as being at risk of anaphylaxis.

The kitchen staff will be trained on how to identify and monitor the correct food labelling and how to manage the removal or 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 foods routes through the school, from supplier delivery to consumption.

Designated staff members will be taught to:

* Recognise the range of signs and symptoms of severe allergic reactions
* Respond appropriately to a requires 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

All staff members will:

* Be trained to recognise the range of symptoms of an allergic reaction
* Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild-moderate symptoms
* Understand that AAIs should be administered without delay as soon as anaphylaxis occurs
* Understand how to check if a pupils is on the register of AAIs
* Understand how to access AAIs
* Understand who the designated members of staff are, and how to access their help
* Understand that it may be necessary for staff members other than designated staff members to administer AAIs e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation
* Be aware of how to administer an AAI should it be necessary
* Be aware of the provisions of this Allergen and Anaphylaxis policy

**11. In the event of a mild-moderate allergic reaction**

Mild-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 pupil, the nearest adult will stay with the pupil and call for help from a First Aider able to administer AAIs.

The pupils prescribed AAI will be administered by the First Aider. Spare AAIs will only be administered where appropriate consent has been received.

Where there is any delay in contacting First Aiders, or where delay could cause a fatality, the nearest staff member will administer the AAI.

A copy of the register of AAIs will be held on the ‘One Drive’ for easy access.

If necessary, other staff members may assist First Aiders with administering AAIs.

The pupil’s parent will be contacted immediately if a pupil suffers a mild-moderate allergic reaction, and if an AAI has been administered.

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a First Aider 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-moderate allergy symptoms, the AAI will usually be sufficient for the reaction, however, the pupil 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 Section 12 of this policy.

**12. In the event of anaphylaxis**

Anaphylaxis symptoms include the following:

* Persistent cough
* Hoarse voice
* Difficulty swallowing, or swollen tongue
* Difficult or noisy breathing
* Persistent dizziness
* Becoming pale or floppy
* Suddenly becoming sleepy, unconscious or collapsing

In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor with their legs raised, and will call for help from a designated staff member.

The designated staff member will administer an AAI to the pupil. Spare AAIs will only be administered if

appropriate consent has been received.

Where there is any delay in contacting designated staff members, the nearest staff member will administer the AAI.

The emergency services will be contacted immediately.

A member of staff will stay with the pupil until the emergency services arrive – the pupil will remain flat and still.

The Headteacher will be contacted immediately, as well as a suitably trained individual, such as a First Aider.

If the pupil stops breathing, a suitable trained member of staff will administer CPR.

If there is no improvement after five minutes, a further dose of adrenaline will be administered using another AAI, if available.

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a First Aider 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 First Aider will contact the pupil’s parents as soon as possible.

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

* Any known allergens the pupil has
* The possible causes of the reaction
* 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 pupil is given plenty of space, moving other pupils to a different room where necessary.

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

A member of staff will accompany the pupil to hospital in the absence of their parents.

If a pupil is taken to hospital by car, two members of staff will accompany them.

Following the occurrence of an allergic reaction, the SLT will review the adequacy of the schools response and will consider the need for any additional support, training or other corrective action.

Appendix 1 – Allergy Declaration Form

|  |  |
| --- | --- |
| Pupil Name: | |
| Year and Form | |
| DOB: | |
| Name and address of GP: | |
| Nature of allergy: |  |
| Severity of allergy: |  |
| 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 may purchase 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 my written consent.

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

Yes

No

Signed by: …………………………………………………………………………………………………………………………………

Full Name: …………………………………………………………………………………………………………………………………

Relationship to the child: ……………………………………………………………………………………………………………..

Date: …………………………………………………………………………………….