



North East London

[Headteacher's Name]

[School Name]

[School Address]

Subject: Information on Anaphylaxis and Adrenaline Auto-Injectors

Dear [Headteacher's Name],

Anaphylaxis is a life-threatening allergic reaction that can happen quickly and requires immediate treatment.

Prompt use of an adrenaline auto-injector (AAI) (these are sometimes known by their brand names EpiPen® or Jext®) can save lives.

Many children in our local area are at risk of severe allergic reactions to foods such as nuts, milk or seafood, and rely on fast-acting support at school.

We are sharing some practical guidance frequently asked questions (FAQs) on how to prepare for and respond to anaphylaxis in school.

Key points:

- Children at risk of anaphylaxis should always carry two AAI's or have them stored accessibly at school.
- Staff should be trained to recognise anaphylaxis and use AAI's confidently.
- Schools can purchase spare AAI's from a pharmacy for emergency use without a prescription (with headteacher sign-off).
- Consent must be in place for use of a child's own or spare AAI.
- Schools must maintain an easily accessible register of children with allergies and their care plans.

Included resources

To support you and your staff we have enclosed:

- FAQs for schools and teachers
- FAQs for parents

These can be shared with relevant staff and parents of children with known allergies.

Training and support

Free training is available from:

- Anaphylaxis UK including online courses for schools - www.anaphylaxis.org.uk

- Device manufacturers video tutorials and trainer pens
 - EpiPen® – www.epipen.co.uk
 - Jext® (Lifeline) – www.jext.co.uk

Please also ensure your school's policy on managing medical conditions reflects this guidance and is clearly communicated to all relevant staff.

If you have any questions or would like support with training or policy development, please contact your local school nursing team.

Thank you for your continued commitment to safeguarding pupil health.

Yours sincerely,

Anaphylaxis and Adrenaline Auto-Injectors (AIs)

Frequently Asked Questions for Schools and Teachers

What is anaphylaxis?

Anaphylaxis is a serious allergic reaction that can happen quickly, begin within minutes and rapidly progress but can occur up to 2-3 hours later. It can be life-threatening and needs emergency treatment straight away.

Common triggers in children include:

- Cow's milk
- Peanuts and other nuts
- Fish and seafood

How do Adrenaline auto-injectors help?

Adrenaline auto-injectors, like EpiPen or Jext, give a quick dose of adrenaline. This helps stop the reaction and gives time for the ambulance to arrive.

What do schools need to do?

Schools must support children with medical needs, including allergies. This means:

- Knowing which children are at risk
- Having clear care plans (called allergy action plans)
- Keeping adrenaline auto-injectors where they are easy to get in an emergency
- Making sure staff know what to do

What should parents provide?

Parents or carers should give the school:

- A completed allergy action plan, signed by a doctor or nurse
- Details of what the child is allergic to
- Permission to use the child's adrenaline auto-injectors if needed
- Permission to use a spare adrenaline auto-injectors kept by the school (optional)
- A recent photo of the child and emergency contact details

Some older children may carry their own adrenaline auto-injectors. Others may need the school to keep them.

What if we know a child has anaphylaxis but we don't have an allergy action plan?

As a minimum, the school should keep a record of:

- Known allergens and risk factors for anaphylaxis in the pupil.
- Whether the pupil has been prescribed adrenaline auto-injectors and if consent has been given for teachers to use them.

- If parental consent has been given for use of spare adrenaline auto-injectors if held by the school.
- A photograph of the pupil to allow a visual check to be made.
- Emergency contact details of parents or guardians.
- Encourage parents and guardians to obtain an allergy action plan

How often do these need to be updated?

It is the parent or guardian's responsibility to update the school of any changes to the child's allergies or plans. The care plans need to be updated regularly and as a minimum **reviewed** annually even if there are no changes to the child's allergy status.

How do we make sure teachers know about children with anaphylaxis and their needs?

Keep a register that is easy for staff to access in school alongside a care plan for each child.

When should an Adrenaline auto-injector be used?

Adrenaline auto-injectors save lives. You should use one immediately if a child has symptoms of an anaphylactic reaction such as:

- Difficulty breathing
- Swollen lips, tongue, or face
- Tight throat
- Rash or itching
- Collapse or dizziness

In many cases the reaction will follow exposure to a known allergen.

Always call 999 for an ambulance and say that a child is having an anaphylactic reaction.

If symptoms have not improved 5 minutes after using the adrenaline auto-injector, another dose with a new adrenaline auto-injector can be given.

Tell the doctor which adrenaline auto-injector you used, and how many. They will need to go to hospital in all circumstances.

How should I give Adrenaline auto-injector?

- There are two different types of adrenaline auto-injector – EpiPen and Jext. These are used in different ways. You must follow the instructions provided with the adrenaline auto-injector.
- The adrenaline auto-injector must only be used in the thigh. Never inject it anywhere else on the body.
- Adrenaline auto-injectors should be in date but remember that even an out-of-date pen is better than nothing.

Detailed information on how to use adrenaline auto-injectors can be found on the manufacturers' websites:

- EpiPen – www.epipen.co.uk
- Jext (Lifeline) – www.jext.co.uk

What if a child is having anaphylaxis but they don't have a prescribed Adrenaline auto-injector?

If you have a spare at school, you can use it, if you have written consent to do so. If you don't have permission, call 999. The emergency operator can give you permission to use it.

What if a child is having anaphylaxis but we don't have consent to use an Adrenaline auto-injector?

Call 999. The professional on the line can give you permission to use one.

Where should a child's own Adrenaline auto-injectors be kept?

Children who can, should always carry two adrenaline auto-injectors on them.

If this is not possible, they should be kept in a central place in a box marked clearly with the child's name but NOT locked in a cupboard or office where access is restricted. They should not be more than five minutes away from where they may be needed.

Parents and guardians need to ensure children have their adrenaline auto-injectors on them to and from school too.

How do schools buy emergency Adrenaline auto-injectors?

Schools can purchase adrenaline auto-injectors from a local pharmacy without a prescription. The pharmacy will need a request signed by the head teacher, ideally on appropriate headed paper.

Schools with emergency adrenaline auto-injectors should establish a policy or protocol for their use.

Which Adrenaline auto-injectors should you buy?

Check your register of children with risk of anaphylaxis. Currently, there are only two brands available: Epipen and Jext, and it is recommended to purchase the brand prescribed to most pupils to avoid confusion. Older and/or heavier children require higher dosage injectors.

Where should they be kept?

They should be kept in a safe central location no more than five minutes away from where they may be needed, like the school office or staffroom, to which all staff always have access but out of the reach of children. They must not be locked away in a cupboard or an office where access is restricted.

Does the medicine expire?

Yes. Check the expiry date regularly. Order replacements in time and take expired ones to a pharmacy for safe disposal.

How do schools access training for staff?

Schools should ensure that staff are trained in recognising anaphylaxis and administering adrenaline auto-injectors. Training can often be arranged via the school nurse, local authority, or allergy charities.