



Allergy Safety Policy

for

Locking Primary School

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The School Allergy Lead for our school is:

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Allergy Safety Policy

1.0 Introduction

- 1.1 An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.
- 1.2 Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.
- 1.3 Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, and Circulation).
- 1.4 It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.
- 1.5 Common UK Allergens include (but are not limited to):

Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect Venom, Pollen and Animal Dander.
- 1.6 This policy sets out how Locking Primary School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2.0 Statement of intent

- 2.1 Locking Primary 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, volunteers, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school.
- 2.2 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.

- 2.3 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.

3.0 Legal framework

- 3.1 This policy has due regard to all relevant legislation and statutory 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
- DfE (2015) 'Supporting pupils at school with medical conditions'
- Children's Wellbeing and Schools Act 2026
- Department for Education (2026) 'Allergy Safety in Schools'.

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

Signpost	Document Title	Responsibility
Policy	Health, Safety and Welfare Policy	ELAN Estates Manager
	Catering Operations – Food Allergen Management	ELAN Estates Manager
	Catering Operations – In-house Catering Policy	ELAN Estates Manager
	Whole School Food Policy	Executive Headteacher
	Supporting Pupils with Medical Conditions and First Aid Policy	ELAN Estates Manager
	Educational Visits Policy	Executive Headteacher
Documents & Procedures	Pupil-specific risk assessment for each child with allergy	Executive Headteacher
	Whole-school Allergy Register	Executive Headteacher
	Adrenaline Auto-Injectors (AAI) Record	Executive Headteacher

4.0 Definitions

4.1 For the purpose of this policy the following definitions are given for the below terms:

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:

- Difficulty breathing
- Feeling faint
- Reduced level of consciousness
- Lips turning blue
- Collapsing
- Becoming unresponsive

5.0 Roles and responsibilities

5.1 Local Governing Body

The local governing body is responsible for:

5.1.1 Nominating a governor for Allergy oversight to support the Headteacher as a 'critical friend'.

- 5.1.2 Ensuring that the school has arrangements in place to support pupils with allergies and who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities.
- 5.1.3 Ensuring that policies, plans, systems and procedures are implemented to minimise the risks of pupils suffering allergic reactions or anaphylaxis at school.
- 5.1.4 Ensuring that the school's approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual pupil.
- 5.1.5 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.
- 5.1.6 Ensuring that staff are properly trained to provide the support that pupils need, and that they receive allergy and anaphylaxis training at least annually.
- 5.1.7 Monitoring the effectiveness of this policy and reviewing it on an annual basis, and after any incident where a pupil experiences an allergic reaction.

5.2 Headteacher

The headteacher is responsible for:

- 5.2.1 The development, implementation and monitoring of the Allergen Safety Policy.
- 5.2.2 Ensuring there is a named School Allergy Lead who is trained to the DfE Allergy Competency Standard, and that
 - the School Allergy Lead undertakes annual recertification
 - the headteacher is responsible for the competence of the named School Allergy Lead, not just the coordination of the policy.
- 5.2.3 Ensuring that the School Allergy Lead has sufficient time, authority, training and resources to fulfil the role and will maintain evidence of competency assessments and annual recertification.
- 5.2.4 Ensuring that parents are informed of their responsibilities in relation to their child's allergies.
- 5.2.5 Ensuring that all school trips are planned in accordance with the Educational Visits Policy, taking into account any potential risks the activities involved pose to pupils with known allergies.

- 5.2.6 Ensuring that the Whole-School Food Policy and the associated protocols are effectively implemented, including those in relation to labelling foods that may contain common allergens, e.g. nuts.
- 5.2.7 Ensuring that all relevant risk assessments, e.g. to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- 5.2.8 Ensuring that all first aiders are trained in the use of adrenaline auto injectors (AAIs) and the management of anaphylaxis.
- 5.2.9 Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
- 5.2.10 Ensuring that the school meal ordering system (SchoolGrid) is maintained with current pupil allergy information to inform the school meals provided.

5.3 School Allergy Lead

The School Allergy Lead will be a member of the Senior Leadership Team or another appropriately designated member of staff and will work closely with the Headteacher, Local Governing Body, school staff, parents/carers and healthcare professionals to ensure effective implementation of this policy.

The School Allergy Lead has overall responsibility for coordinating and monitoring allergy management within the school. The School Allergy Lead will:

- 5.3.1 Lead the development, implementation, monitoring and annual review of the school's Allergy Safety Policy.
- 5.3.2 Maintain an up-to-date register of pupils with diagnosed allergies and ensure that appropriate records are accurate, secure and accessible to relevant staff.
- 5.3.3 Ensure that Individual Healthcare Plans (IHPs) are in place, reviewed regularly, and communicated to all staff with responsibility for affected pupils.
- 5.3.4 Act as the main point of contact for parents, carers, healthcare professionals and other agencies regarding allergy management and support.
- 5.3.5 Coordinate and monitor allergy awareness and anaphylaxis training for all staff, ensuring training records are maintained and refreshed as required.

- 5.3.6 Ensure that emergency medication, including adrenaline auto-injectors (AAIs), is available, stored appropriately, checked monthly (as a minimum) regularly for expiry dates, and accessible in an emergency.
- 5.3.7 Ensure that the Allergy Register is relevant and up-to-date.
- 5.3.8 Promote awareness of allergies throughout the school community and support a whole-school approach to allergy safety and inclusion.
- 5.3.9 Work with catering staff, educational visit leaders and other relevant staff to identify, assess and minimise allergy risks in all school activities.
- 5.3.10 Ensure that arrangements for trips, visits, extracurricular activities and special events appropriately meet the needs of pupils with allergies.
- 5.3.11 Monitor, record and investigate allergy incidents, reactions and near misses, identifying lessons learned and implementing actions to reduce future risks.
- 5.3.12 Oversee the protocol for the use of spare AAIs, its monitoring and implementation, and for maintaining the Register of AAIs. Any used or expired AAIs are disposed of after use in accordance with manufacturer's instructions.
- 5.3.13 Provide advice and support to staff regarding allergy management procedures and emergency response arrangements.
- 5.3.14 Report allergy-related matters, including training compliance, incidents and policy effectiveness, to the Headteacher and Governing Body as appropriate.
- 5.3.15 Promote an inclusive environment that enables pupils with allergies to participate safely and fully in all aspects of school life.

5.4 School staff

All staff members are responsible for:

- 5.4.1 Acting in accordance with the school's policies and procedures at all times.
- 5.4.2 Attending relevant training regarding allergens and anaphylaxis.
- 5.4.3 Being familiar with and implementing pupils' individual healthcare plans (IHPs) as appropriate.
- 5.4.4 Responding immediately and appropriately in the event of a medical emergency.

- 5.4.5 Reinforcing effective hygiene practices, including those in relation to the management of food.
- 5.4.6 Promoting hand washing before and after eating.
- 5.4.7 Taking reasonable steps to ensure food provided through school activities is suitable for pupils with known allergies.
- 5.4.8 Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
- 5.4.9 Ensuring that any necessary medication is out of the reach of pupils but still easily accessible to staff members.
- 5.4.10 Liaising with medical professionals and pupils' parents to ensure the necessary control measures are in place.

5.5 ELAN Catering Service

The ELAN Catering service has a trust wide policy covering its operations and allergen policy.

The ELAN catering service is responsible for:

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

ELAN Catering staff are responsible for:

- 5.5.6 Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with section 6 of this policy, and the processes for identifying pupils with specific dietary requirements.
- 5.5.7 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.

5.5.8 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.

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

5.6 Parents/Carers

All parents and carers are responsible for:

5.6.1 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

5.6.2 Keeping the school up-to-date with their child's medical information.

5.6.3 Providing written consent for the use of a spare AAI (where the child is known to be at risk of anaphylaxis). An example template format is provided in Appendix 2.

5.6.4 Providing the school with up-to-date emergency contact information.

5.6.5 Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.

5.6.6 Providing the school with any necessary medication, in line with the procedures outlined in the Supporting Pupils with Medical Conditions Policy.

5.6.7 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.

5.6.8 Providing the school, in writing, any details regarding the child's allergies.

- 5.6.9 Working alongside the school to develop an Individual Healthcare Plan (IHP) to accommodate the child's needs as well as undertaking the necessary risk assessment.
- 5.6.10 Signing their child's IHP, where required.
- 5.6.11 Acting in accordance with any allergy-related requests made by the school, such as not providing nut-containing items in their child's packed lunch.
- 5.6.12 Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
- 5.6.13 Providing a supply of 'safe' snacks for any individual attending school events.
- 5.6.14 Raising any concerns they may have about the management of their child's allergies with the classroom teacher.
- 5.6.15 Ensuring that any food their child brings to school is safe for them to consume.
- 5.6.16 Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided.

5.7 Pupils

The school will provide age-appropriate allergy awareness education to pupils, including the dangers of allergen exposure, food sharing and bullying related to allergies.

Deliberate exposure to an allergen, allergen-related intimidation, food-sharing pressure or allergy-related bullying will be treated as a serious safeguarding matter and managed in accordance with the Behaviour and Safeguarding Policies.

The school will ensure that its pupils understand their responsibilities to themselves and others by:

- 5.7.1 Ensuring that they do not exchange food with other pupils.
- 5.7.2 Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- 5.7.3 Being proactive in the care and management of their allergies.

- 5.7.4 Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- 5.7.5 Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- 5.7.6 Learning to recognise personal symptoms of an allergic reaction.
- 5.7.7 Keeping necessary medications in an agreed location which members of staff are aware of.
- 5.7.8 Developing greater independence in keeping themselves safe from allergens.
- 5.7.9 Notifying a staff member if they are being bullied or harassed as a result of their allergies

6.0 Food allergies

6.1 Identification and support of pupils with allergies and dietary requirements

- 6.1.1 Parents are required to 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.
- 6.1.2 Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be recorded on SchoolGrid (school meal ordering system) and available to the ELAN catering service.
- 6.1.3 When the ELAN Catering Service makes changes to menus or substituting food products, the kitchen staff will ensure that pupils' 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.
- 6.1.4 The ELAN Catering Service will have a full list of allergens and will avoid using them within the menu where possible.
- 6.1.5 Where meals include allergens or traces of allergens, staff will use clear and fully visible labels, in line with section 6 of this policy, to denote the allergens of which consumers should be aware.

6.1.6 The ELAN Catering Service will ensure that alternative menu choices are available for pupils with allergies and intolerances.

- Parents must inform the school of any allergies or intolerances so appropriate records and support can be put in place.
- The school uses SchoolGrid to provide up-to-date allergen and ingredient information for all menu items, in line with UK food information regulations.
- The school menu is available for parents to view in advance with all ingredients listed and allergens highlighted on the school website at <https://www.lockingprimaryschool.co.uk>
- Parents and carers can access allergen details for each meal by logging into SchoolGrid and selecting individual menu items.
- SchoolGrid only enables meals to be pre-ordered, and meals with allergens are not available to pupils with a recorded allergen.
- SchoolGrid enables pupils to identify themselves via the touchpad in the dining hall to receive their meals. This helps ensure that pupils are served the correct meal in accordance with any recorded allergies, intolerances, or dietary requirements.
- While all reasonable precautions are taken, food is prepared in environments where allergens are present, and therefore the school cannot guarantee that meals are completely free from trace allergens.
- The school works closely with families and the ELAN Catering Service to support pupils with medical, cultural, or religious dietary needs, and individual healthcare plans will be implemented where necessary.

6.2 Nut allergies

6.2.1 All ELAN schools aim to maintain a nut-aware and, wherever reasonably practicable, nut-free environment.

6.2.2 All ELAN schools operate a nut-free premises protocol in accordance with the trust's Health, Safety and Welfare Policy and the school's local policy.

6.2.3 The following items should not be brought onto school premises:

- packs of nuts
- peanut butter sandwiches
- foods containing visible nut products
- nut-based cereal bars
- cakes containing nuts
- other foods identified by the school as presenting a significant allergy risk.

- 6.2.4 The ELAN Catering Service does not knowingly use nuts as ingredients in food prepared within its kitchens. However, complete exclusion of nut traces cannot be guaranteed due to manufacturing and supply chain factors.
- 6.2.5 The school will ensure it has protocols in place to minimise the risk of food products containing nuts being brought onto its premises by staff or pupils.
- 6.2.6 The school will ensure that lunchtime supervisory staff clean and disinfect all dining tables before and after use to minimise the risk of allergen cross-contamination.

6.3 Food allergen labelling

- 6.3.1 The school will adhere to allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019.
- 6.3.2 The ELAN Catering Service does not provide prepacked foodstuffs as part of the meal offer.
- 6.3.3 Schools will however ensure that any prepacked items (such as sandwiches, salad pots etc) purchased for school trips, breakfast clubs, after school clubs or any other school provision are 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.
- 6.3.4 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

6.4 Declared allergens

- 6.4.1 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

7.0 Animal allergies

- 7.1 Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.
- 7.2 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.
- 7.3 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.

8.0 Seasonal allergies

- 8.1 The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.
- 8.2 Precautions regarding the prevention of seasonal allergies include ensuring that grass within the school premises is not mown whilst pupils are outside.
- 8.3 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.
- 8.4 Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.
- 8.5 Pupils will be encouraged to wash their hands after playing outside.
- 8.6 Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.

8.7 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 ELAN estates team.

8.8 The ELAN estates team are responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.

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

9.0 Allergy action plans

9.1 Allergy action plans are designed to function as individual healthcare plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto-injector.

9.2 It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/Allergy Specialist) and provide this to the school.

10.0 Adrenaline auto-injectors (AAIs or EpiPens)

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

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

10.3 The school will purchase spare AAIs from a pharmaceutical supplier. 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.

10.4 The School Allergy Lead in conjunction with a medical professional, will decide which brands of AAI to purchase.

10.5 Where possible, the school will hold 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.

10.6 AAIs will be stocked in accordance with current clinical guidance and the age/weight profile of pupils at risk.

10.7 Spare AAI's are stored as part of an emergency anaphylaxis kit, which includes the following:

- One or more AAI's
- 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 list of pupils to whom the AAI can be administered
- An administration record

Emergency medication must be accessible within five minutes at all times and must accompany pupils during off-site activities, PE lessons, playground activities and educational visits.

10.8 Pupils who have prescribed AAI devices will be stored in a suitably safe location.

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

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

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

10.12 Used AAI's may also be given to paramedics upon arrival.

10.13 A sharps bin is utilised where used or expired AAI's are disposed of on the school premises.

10.14 Where any AAI's are used, the following information will be recorded on the AAI Record:

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

11.0 Access to spare AAI's/EpiPens

11.1 Spare AAI's are stocked for emergency use on any child or adult experiencing anaphylaxis on the premises.

11.2 The school will strictly maintain a stock of spare emergency Adrenaline Auto-Injectors (AAIs).

11.3 The use of spare AAIs will be undertaken in accordance with current Department for Education and Department of Health guidance and local medical protocols.

12.0 Medical attention and required support

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

12.2 All medical attention, including that in relation to administering medication, will be conducted in accordance with the Supporting Pupils with Medical Conditions Policy.

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

12.4 Where required medication is unavailable, the school will undertake an individual risk assessment and agree appropriate arrangements with parents.

12.5 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.

12.6 Any specified support which the pupil may require is outlined in their IHP.

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

12.8 The School Allergy Lead will work alongside relevant staff members and parents in order to develop IHPs for pupils with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.

12.9 The School Allergy Lead will ensure that IHPs are implemented, monitored and communicated to the relevant members of the school community.

13.0 Staff training

13.1 Every member of staff must receive mandatory, annual Allergy Awareness and Emergency Response Training.

13.2 All temporary, agency and supply staff will receive an allergy safety briefing before commencing duties, including access to the Allergy Register, emergency procedures and details of pupils at risk of anaphylaxis.

14.0 In the event of a mild-moderate allergic reaction

14.1 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

14.2 If any of the above symptoms occur in a pupil, the nearest member of staff will stay with the pupil and call for help from staff members able to administer AAIs.

14.3 The pupil's prescribed AAI will be administered by a member of school staff.

14.4 Relevant staff have immediate access to current pupil allergy information and emergency procedures.

14.5 Other staff members may assist staff members with administering AAIs if necessary.

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

14.7 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 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.

14.8 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.

14.9 The School Allergy Lead will refer any pupil who has been administered an AAI to the hospital for further monitoring.

14.10 The headteacher will ensure that any staff member required to administer an AAI has appropriate cover in place, e.g. if they were teaching a class at the time of the reaction.

15.0 In the event of anaphylaxis

15.1 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
- 15.2 In the event of anaphylaxis, the nearest staff member will lay the pupil flat on the floor with their legs raised, and will call for help from staff members able to administer AAls.
- 15.3 The member of school staff will administer an AAI to the pupil.
- 15.4 The emergency services will be contacted immediately.
- 15.5 A member of staff will stay with the pupil until the emergency services arrive – the pupil will remain lay flat and still.
- 15.6 The headteacher will be contacted immediately, as well as a suitably trained individual, such as a first aider.
- 15.7 If the pupil stops breathing, a suitably trained member of staff will administer CPR.
- 15.8 If there is no improvement after five minutes, a further dose of adrenaline will be administered using another AAI, if available.
- 15.9 The school will contact the pupil's parents as soon as possible.
- 15.10 Upon arrival of the emergency services, the following information will be provided:
- Any known allergens for the pupil declared to the school
 - The possible causes of the reaction, e.g. certain food, insect bite
 - The time the AAI was administered – including the time of the second dose, if this was administered
- 15.11 Any used AAls will be given to paramedics.
- 15.12 Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.
- 15.13 Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.
- 15.14 A member of staff will accompany the pupil to hospital in the absence of their parents.
- 15.15 If a pupil is taken to hospital by car, two members of staff will accompany them.

15.16 Following the occurrence of an allergic reaction, the School Leadership Team will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

16.0 Mandatory drills and Near-miss recording

16.1 Schools should run practical emergency response drills at least twice a year for staff.

16.2 All allergic incidents, communication gaps, and accidental exposure "near-misses" are logged, reviewed by the Senior Leadership Team, and used to implement corrective actions immediately.

16.3 All allergic reactions, administration of AAls and near misses will be investigated by the School Allergy Lead. Findings, lessons learned and corrective actions will be documented and reviewed by senior leaders.

17.0 Risk Assessment

17.1 The school will ensure that there is in place:

- A pupil-specific risk assessment for each child with allergy.
- A process to update such risk assessments:
 - after any reaction
 - after any menu change
 - after any classroom activity change
 - at least termly

17.2 A specific allergy risk assessment will be completed for all educational visits involving pupils with known allergies. Emergency medication, trained staff, emergency contact details and catering arrangements must be confirmed before departure.

18.0 Pupil Allergen Information Review

18.1 Allergy information will be reviewed and transferred whenever a pupil:

- joins the school
- transfers class
- moves to another setting
- attends residential visits or off-site activities.

19.0 Monitoring and review

19.1 The Headteacher is responsible for reviewing this policy annually.

- 19.2 The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher immediately.
- 19.3 Following each occurrence of an allergic reaction, this policy and pupils' IHP will be updated and amended as necessary.

Appendix 1 - Individual Healthcare Plan for allergy

NAME – Individual Healthcare Plan for allergy	
Date of birth:	Current photo
Year / class:	
Emergency contacts:	
Staff who need to be aware:	
Allergy: <i>Note what allergy the child or young person has.</i> <i>Note any known allergens.</i> <i>Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.</i>	
How the allergy is managed: <i>Note any care or action plans or prescribed medication issued by healthcare professionals.</i> <i>If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.</i> <i>Note the extent to which the child or young person is able to take responsibility for managing their allergy.</i>	
Impact on education: <i>Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.</i> <i>Indicate how the allergy may impact on the child or young person's learning.</i> <i>Indicate how the allergy may impact on the child or young person's emotional wellbeing.</i> <i>If relevant, note any interaction between allergy and SEN.</i>	
Arrangements for support: <i>Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.</i> <i>Outline measures to reduce the risk of contact with known allergens.</i> <i>Give details of the specific support or adaptations to manage food allergy at meal and snack times.</i> <i>Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.</i>	
Visits and trips: <i>Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.</i>	

Note any requirement for a risk assessment and prompts for specific issues which should be considered.

Emergency response:

Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.

Otherwise summarise the signs or symptoms which would indicate an emergency.

Set out what to do in an emergency, including whom to contact.

If relevant, note where “spare” adrenaline devices are located.

Last discussed with parents:	Date
Issued by:	Date:
Next planned review:	Date:

Appendix 2 – Parent/carer Consent for Administration of a Spare Adrenaline Auto-Injector (AAI)

Consent for Administration of a Spare Adrenaline Auto-Injector (AAI)

Pupil Details

Pupil Name		Date of Birth	
Year Group / Class			

Medical Information

I confirm that:

- My child has been assessed by a healthcare professional as being at risk of anaphylaxis.
- My child has been prescribed an adrenaline auto-injector (AAI).
- Known allergen(s): _____
- My child has their own prescribed AAIs available in accordance with the school's medical arrangements.

Parental Consent

In the event of my child displaying symptoms of anaphylaxis and their own prescribed AAI is unavailable, inaccessible, out of date, ineffective, or a second dose of adrenaline is required, I give permission for appropriately trained school staff to administer adrenaline using the school's spare AAI.

I understand that:

- The school will seek emergency medical assistance immediately following administration of an AAI.
- The school will contact me/us as soon as practicable.
- This consent remains valid until withdrawn in writing or superseded by updated medical information.

Emergency Contacts

Name:		Alternative Contact Name	
Relationship:		Relationship:	
Telephone:		Telephone:	

Parent/Carer Declaration

Name:

Signature:

Date: