St. Anne's and Guardian Angels

Excellence Together with Christ at the Centre

Allergy Safety Policy and Procedure

Approved by:	St Anne's and Guardian Angels Primary School Governing Body	**Date:** September 2026
Last reviewed:	August 2026	
Next review due by:	August 2027	

This policy has been developed using a model policy provided by **The Key for School Leaders**. The Key's model policy has been reviewed and approved by **Forbes Solicitors**. The model has been adapted, where necessary, to reflect the context, procedures and arrangements of the school.

1. Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

3.1 The governing board

The governing board is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed
- The school has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis

The governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy safety lead

The nominated allergy safety lead is Angela Howick.

They're responsible for:

- Implementing this allergy safety policy
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff

- All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP)
- All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
- All staff receive regular allergy awareness training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
    - What lessons there are to learn
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP

- Overseeing arrangements for pupils with allergies during educational visits, residential visits and other activities
- Ensuring appropriate allergy risk assessments are completed where required and reviewing these
- Maintaining effective communication with parents/carers regarding the school's allergy management arrangements
- Line managing and directing the work of the Allergy Support Volunteers

3.3 Head of School

The Head of School is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances

3.4 Named volunteers among school staff

Samantha Wildego and Paul Lewis are responsible for:

- Checking on a monthly basis that spare AAIs are present, accessible and within their expiry date
- Checking that pupil-specific emergency allergy medication held by the school remains in date and appropriately stored
- Maintaining records of medication checks and report concerns to the Allergy Safety Lead
- Notifying the Allergy Safety Lead when replacement medication is required
- Supporting the safe disposal and replacement of expired medication
- Assisting in maintaining allergy registers and records as directed by the Allergy Safety Lead
- Supporting communication with parents/carers regarding routine matters such as replacement medication and updated paperwork
- Assisting with the induction of new pupils with allergies by helping gather required documentation and medication

- Supporting the preparation and checking of allergy information and medication for educational visits and off-site activities
- Promoting allergy awareness amongst pupils through agreed school initiatives and events
- Reporting any allergy-related concerns, incidents or near misses to the Allergy Safety Lead immediately

The Allergy Support Volunteers are not responsible for clinical decision-making, policy implementation, staff training, risk assessment approval or the management of individual healthcare plans. Responsibility for these matters remains with the Allergy Safety Lead.

3.5 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead
- All staff have a responsibility to foster positive partnerships with parents/carers of pupils with allergies and to promote open communication regarding a pupil's allergy needs. Any new information, changes to medical needs, concerns, feedback, incidents or near misses must be reported to the Allergy Safety Lead without delay so that appropriate action can be taken and records can be updated as necessary.

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of our school’s allergy safety policy
- Providing the school with up-to-date details of their child’s medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school’s guidance on food brought in to be shared
- Updating the school on any changes to their child’s condition
- All parents/carers, regardless of whether their child has an allergy, are expected to support the school's efforts to reduce the risk of allergic reactions. This includes adhering to school guidance on food and other items brought onto the premises, following instructions relating to specific pupils or activities where appropriate, and working in partnership with the school to promote a safe and inclusive environment for all members of the school community.

3.7 Pupils with allergies

Pupils with allergies will be supported to understand and manage their allergy in a way that is appropriate to their age, understanding and individual needs. **Responsibility for ensuring appropriate arrangements are in place remains with the school and relevant adults.**

Where age and developmentally appropriate, pupils with allergies are encouraged to:

- Develop an understanding of their allergy, including foods or other substances they need to avoid.
- Follow the allergy safety guidance given to them by parents/carers and school staff
- Not share or swap food, drinks, eating utensils, medication or other personal items.
- Wash their hands before and after eating, where appropriate.
- Tell a member of staff immediately if they feel unwell or think they may have come into contact with something to which they are allergic.
- Tell a member of staff if they have any concerns about their allergy, medication, food being provided or an activity in which they are taking part.
- Know, where appropriate, what their allergy medication is for and where it is kept.
- Develop increasing independence in managing their allergy and medication as they get older, where this has been agreed with parents/carers and the school.

Pupils will **not** be expected to take sole responsibility for recognising or managing an allergic reaction, administering medication or ensuring that emergency medication is available.

3.8 All Pupils

All pupils have a role in helping to maintain an allergy-aware school environment. Expectations will be explained in an age-appropriate way and will not place responsibility for another pupil's medical needs on children.

Pupils are expected to:

- Follow the school's allergy safety rules and instructions from staff.
- Only bring food and other items into school in accordance with school procedures.
- Not share or swap food, drinks, medication or other personal items.
- Wash their hands when requested, particularly before and after eating.
- Help to keep eating areas clean and free from food debris.
- Show kindness, understanding and respect towards pupils with allergies and never deliberately expose another pupil to a known allergen.
- Tell an adult if they notice something that they think may present an allergy risk.
- Tell an adult immediately if another pupil appears unwell or asks them to get help.
- Take part in age-appropriate learning about allergies and how everyone can help to keep the school community safe.

All pupils can contribute to a safe, inclusive and supportive school environment. However, pupils are not responsible for managing another child's allergy or responding to a medical emergency. The school and its staff retain responsibility for implementing appropriate allergy-management and emergency procedures.

4. Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an “allergen”) they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to all parents/carers at the start of each year asking them to update their child’s medical information as necessary via e-mail and printed copy.

We ask that parents/carers proactively inform us by either phone call to the school 02072476327 or an email to office@stannesgaprimary.com (mark for the attention of Mrs Angela Howick) if their child’s medical needs change during the school year.

4.2 Identifying staff and visitors at risk

We will:

- Ask new staff to provide details of their allergies in advance of their start date (included on ‘new starter form’
- Ask visitors to provide details of their allergies in advance of their visit
- Ask visitors for details of any allergies upon arrival at the school

4.3 Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the pupil while they are at school, or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The Head of School is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

4.4 Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings **should be issued with an appropriate allergy action plan by their healthcare professional.**

All pupils who have asthma should be issued with an asthma action plan **by their healthcare professional.**

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.
The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Register of pupils with known allergies

- The school maintains a register of pupils who have a known allergy. The register includes:
    - Known allergens and risk factors for anaphylaxis
    - Whether a pupil has been prescribed ADs (and if so, what type and dose)
    - Where a pupil has been prescribed an AD, whether parental consent has been given to administer emergency medication
    - A photograph of each pupil to allow a visual check to be made
- The register is kept in
    - The medical room
    - School office
    - School kitchen

and can be checked quickly by any member of staff as part of initiating an emergency response

The school also holds a central register of allergies and medical needs on its MIS system, Bromcom.

If appropriate, pupils will keep their ADs with them will reduce delays and allow for confirmation of consent without the need to check the register.

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

6. Minimising risk

6.1 Hygiene procedures

The school will take the following steps to prevent contamination:

- Pupils are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Refrain from products such as lip balm or other items that may contain allergens.
- Keep eating areas clean and tidy and dispose of food waste appropriately.
- Avoid touching, handling or moving another pupil's food, drink or eating equipment.
- Pupils have their own named water bottles, and lunch boxes provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance
- Immediately inform a member of staff if they become aware of spillages, contamination risks or any concerns relating to allergy safety.

6.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

School meals are provided by Tower Hamlets Contract Services who can be contacted by calling: 020 7364 5172 / 020 7364 6138

- Catering staff receive appropriate training and are able to identify pupils with allergies
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers

- Where changes are made to school menus, we will make sure these comply with legislation, and continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Where food is provided by the school, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination
- Food brought into school for celebrations, fundraising events or curriculum activities will be carefully considered on a case-by-case basis. Staff will take account of the allergies of pupils involved and will consult parents/carers where appropriate. Alternative arrangements will be made where necessary to ensure pupils with allergies can participate safely and inclusively.

6.3 Insect bites/stings

To minimise the risk of insect bites and stings:

When outdoors:

- Suitable footwear should be worn at all times.
- Food and drink should be covered whenever possible.
- Pupils should avoid walking barefoot on grass, fields or other outdoor areas.
- Pupils should be discouraged from disturbing insects, nests or hives.
- Outdoor eating areas should be supervised and checked for wasps, bees or other stinging insects where practicable.
- Bins should be kept covered and emptied regularly to help reduce the attraction of insects.
- Any known nests, hives or areas of increased insect activity should be reported immediately to the Premises Manager and appropriate action taken to limit access.
- Pupils and staff should avoid wearing heavily scented perfumes, body sprays or lotions during outdoor activities where this may increase the attraction of insects.
- Care should be taken when undertaking activities in wooded areas, gardens, fields or near flowering plants.

For pupils with a known insect sting allergy:

- An up-to-date Allergy Action Plan and Individual Healthcare Plan (IHP) must be in place.
- Prescribed adrenaline auto-injectors (AAIs) must be readily accessible at all times, including during educational visits, sporting activities and outdoor learning.
- Relevant staff should be aware of the pupil's allergy and understand the emergency response procedures.
- Risk assessments should be completed for activities where there may be an increased risk of exposure to stinging insects.

The school cannot guarantee an insect-free environment but will take reasonable steps to minimise risks and support pupils with known insect sting allergies.

6.4 Animals

To minimise the risk of allergic reactions associated with animals:

- Appropriate consideration will be given before animals are brought onto the school site or involved in educational activities.
- Information about pupils with known animal allergies will be considered when planning activities involving animals.
- All pupils and staff will wash their hands thoroughly after interacting with animals, their equipment, bedding or feeding materials.
- Pupils will be discouraged from touching their face, eyes or mouth when interacting with animals and until hands have been washed.
- Areas used by animals will be cleaned appropriately after use.
- Animals will not be permitted in food preparation, food storage or dining areas, unless required by law or agreed as part of an individual assessment.
- Pupils with known animal allergies will not be required to interact directly with animals and reasonable adjustments will be made to ensure they can participate safely in learning activities.
- Risk assessments will be undertaken before animal visits, animal-assisted interventions or activities involving animals where there is a foreseeable risk to pupils or staff with allergies.
- Parents/carers will be informed in advance where animals will be present as part of a planned activity where this is reasonably practicable.
- Staff should remain alert for signs of an allergic reaction during and following contact with animals and follow the school's allergy procedures where concerns arise.

While the school will take reasonable steps to minimise exposure to animal allergens, it is not possible to guarantee an allergen-free environment.

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs with them
- Staff trained to administer adrenaline in an emergency will be present on the school trip

- Appropriate measures will be taken in line with the school's AD protocols for off-site events and school trips (see section 8.5)

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
    - The pupil does not have a prescribed AD
    - The pupil's prescribed AD are not available or misfire

8. Adrenaline devices (ADs)

8.1 Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times.

Travelling to and From School

Parents are responsible for ensuring that their child has their prescribed AD with them when travelling to and from school. We recommend that this is carried in the child's school bag. Parents are responsible for ensuring that these are in date.

During the School Day

All pupils are issued with an orange Medpac bag (orange medical pack):



This bag will contain:

- A personal details card including up to date photograph
- Two AD devices
- A copy of their IHP
- Emergency contact details

In the classroom

- All Medpac bags will be kept in a green drawstring bag (Class Medical Bag) in a visible and accessible location in the classroom. This bag must be labelled with the Class Name and Year Group
- The Class Medical Bag must be kept in an appropriate central location that is unlocked and accessible at all times
- It must be kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature



Outside of the classroom (playground, hall etc.)

- The Class Medical Bag (green bag) will be carried by a member of staff during the activity (assembly, PE etc.) and then returned to the appropriate central location within the classroom upon return to class

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

The school will record which pupils have been provided with prescribed adrenaline (and an allergy action plan) in the allergy registers and on the MIS system, Bromcom.

Wraparound Care (breakfast club and after school clubs)

- **Breakfast Club**: The supervising adult must ensure that any Medpacs (orange medical packs) are retrieved from the Class Medical Bag and brought to breakfast club. The supervising adult is responsible for ensuring that these are returned to the Class Medical Bag at the end of Breakfast club
- **After School Clubs**: Pupils must bring their Medpac (orange medical pack) from their classroom to any clubs. The class teacher (or those acting in their place when absent) must distribute these at the end of each day
- The pupil Medpac (orange medical pack) must be returned to the Class Medical Bag (green drawstring bag) at the end of any club by the supervising adult

8.2 Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school's spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma reliver inhaler and ensuring they are stored according to the guidance.

- The ADs will be sourced via a pharmacy (Eurika Direct online)
- The school will store 4 spare ADs:
    - 2 x 150 microgram dose - for children weighing less than 25kg
    - 2 x 300 microgram dose - for children weighing 25kg or more
- The school will purchase 'Epi Pen' branded ADs

Spare ADs will be stored:

- In the school's medical room: a central location that is unlocked and accessible to **staff only** at all times
- **No more than** 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion

Samantha Wildego and Paul Lewis are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliver inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions.

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events.

The lead member of staff for the trip will check that the child's 2 ADs are brought on any trips or outings and that the lead first aider carries spare ADs in their first aid kit.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

9.1 Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book and on the SLT file of the school's Microsoft Teams system, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a pupil aged up to 16 should be notified of the incident or 'near miss' as soon as possible.

The school will share the report with the pupil's parents, the pupil or the individual involved. They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with Mrs Angela Howick (designated leader responsible for medical conditions and allergies), the Head of School and the Executive Headteacher. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff.

In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school has purchased 'training pens' from EpiPen and Jext so staff can practise safely and be familiar with the differences.

The school will conduct allergy safety drills annually. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist
- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan

- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')

New staff who join part way through the year along with long term supply staff will receive allergy awareness training by completing 'The Key' online allergy training modules. They will also be briefed by the allergy lead.

10.2 Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

Pupils will be taught allergy awareness through RSHE lessons, school assemblies and school publications (including posters).

11. Wellbeing

Pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy.

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis

The school will respond to any instance of bullying in line with its behavior policy.

11.1 Wellbeing support following an incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the pupil but their family, those involved in responding. and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See section 9 of the policy for more detail on incidents and 'near misses'.

12. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

13. Monitoring arrangements

This policy will be monitored by the allergy safety lead.

It will be reviewed and approved annually by the allergy safety lead, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

14. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- School food policy
- Data protection policy
- Behavior policy

Individual Healthcare Plan: Allergy
FULL NAME: XXXX

Individual Healthcare Plan for allergy		
Date of birth:		Current photo
Year / class:		
Emergency contacts:		
Staff who need to be aware:		

Allergy Details	
Type of allergy:	
Any known allergens:	
Is the child or young person likely to be aware that they are having an allergic reaction and are they able to alert others?	

How the Allergy is Managed	
Has an allergy action plan been issued by healthcare professionals?	**Yes / No** *If yes, attach a copy.*
Details of any prescribed medication issued by healthcare professionals:	
Details of any non-prescription medication used to manage the allergy:	
If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here:	
Note the extent to which the child or young person is able to take responsibility for managing their allergy:	

Impact on Education	
Indicate how the allergy may impact on the child or young person's learning:	
Indicate the potential harm which might come to the child or young person if their allergy is not managed properly:	
Indicate how the allergy may impact on the child or young person's emotional wellbeing:	

If relevant, note any interaction between allergy and SEN:	
Arrangements for Support	
Details of the specific support or adaptations which the school, college or early years setting will put in place:	
Measures to be taken to reduce the risk of contact with known allergens:	
Details of the specific support or adaptations to manage food allergy at meal and snack times:	
Arrangements for maintaining educational progress where absence or missed learning occurs due to allergy:	
Visits and Trips	
Details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable to ensure participation:	
Specific issues which should be considered for risk assessments:	
Emergency Response	
Where an Action Plan issued by a healthcare professional covers emergency response, ensure that a copy is attached to this IHP.	
Signs or symptoms which would indicate an emergency:	
What to do in an emergency, including whom to contact:	
If relevant, note where "spare" adrenaline devices are located:	
Last discussed with parents:	**Date:**
IHP completed and issued by (staff name):	**Name:** **Date**:
Next planned review: (At least annually, earlier if condition or medical advice changes)	**Date**: