BARTONS PRIMARY SCHOOL

ALLERGY SAFETY POLICY

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Governor Committee	FGB
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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:

Children's Wellbeing and Schools Act 2026
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 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.

Reviewing and approving the allergy safety policy annually.

Taking steps to ensure the allergy safety policy is:

- Generally known within the school and to parents of pupils at the school.
- At least once a year, brought to the attention of all pupils, parents/carers, staff and volunteers.
- Published on the school's website.

Ensuring risks relating to pupils with allergies are included in the risk register and actively managed.

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 Ali Powell.

- They are responsible for:
- Implementing this allergy safety policy
- Contributing to the review of the allergy safety policy
- 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 (IHCP)
  - 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 are there to learn?
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHCP

3.3 Headteacher

The headteacher 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. This is in collaboration with the SENCo.

Ensuring the school community are informed regularly about any changes or problems arising.

3.4

Ali Powell and Debbie Camp will be responsible for:

- Checking spare AAIs are in school and in date monthly.
- Making sure that replacement AAIs are purchased when expiry dates approach.

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 of 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.

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 that can and can't be brought in to be shared.
- Updating the school on any changes to their child's condition.

3.7 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose.
- Carrying their AD on their person when necessary and only using it for its intended purpose.
- Understanding how and when to use their AD.

3.8 Pupils without allergies

These pupils are responsible for:

Being aware of allergens and the risk they pose to their peers who have allergies.

Older pupils would be expected to support their peers and staff in the case of an emergency, e.g. alert staff immediately to a problem with another child.

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") that 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 mold.
- 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 may be triggered by airborne allergens.
- Allergy to insect stings and medicines

4.1 Identifying pupils at risk.

We will:

- For new starters, parent/carers of pupils will complete the health care form before they start school which confirms any allergies the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, parents will complete a health care form and the arrangements will be put in place.
- Have discussions with parents/carers to ensure that the IHCP is accurate.
- Send a reminder to parents/carers at the start of each year asking them to update their child's medical information, as necessary.

We ask that parents/carers proactively inform us by either phone call to the school or an email to the school office if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk.

We will:

- Ask new staff members to provide details of any allergies in advance of their start date.
- Visitors will be asked to provide details of their allergies in advance of their visit.

4.3 Individual healthcare plans (IHCP)

Pupils should have an IHCP 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 IHCP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHCP 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 IHCP. 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 headteacher and SENCo are 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 IHCP 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 IHCP 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 IHCP may not be required.

IHCPs will be reviewed annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHCP 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 IHCP. Whenever the allergy action plan is updated, the pupil's IHCP should be reviewed to incorporate it.

4.5 Record of individuals with known allergies

The school maintains a record of all individuals who have a known allergy. The record includes:

- Known allergens and risk factors for anaphylaxis.
- Whether a pupil has an Individual Healthcare Plan including Allergy Action Plan if necessary.
- A photograph of each individual (photographs of pupils will require parental consent).

The IHCP information is displayed in the Staff room, First-Aid room, school hall and school office. IHCP's are in the First-Aid folder.

5. Assessing risk

The school will conduct a risk assessment as part of their individual health care plan 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 experience or baking.

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

6. Minimising risk

6.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating.
- Sharing of food, food containers, and food utensils is not allowed.
- 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.

6.2 Catering

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

- Catering staff receive appropriate training and are able to identify pupils with allergies. Children with special diets wear a lanyard so that they can be easily identified.
- The school will have assurances from the caterers that the necessary controls are in place to ensure that food service complies with relevant requirements.
- School menus are available from the caterers for parents/carers and pupils to view with ingredients clearly labelled.
- 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 check food labels for food allergens and will check with parents if there are any questions.
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

6.3 Insect bites/stings

First-Aiders will treat any insect bites or stings in line with their training. For children with allergies, staff will consult the IHCP and speak to parents/carers if necessary, about treatments or next steps.

When outdoors:

- Shoes should always be worn.
- Food and drink should be covered.

6.4 Animals

- All pupils will always wash hands after interacting with any visiting animals to avoid putting pupils with allergies at risk through contact.
- Pupils with animal allergies will not interact with animals.

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part in any school visits.
- 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.
- The first-aider on the school trip will have the AD'd for pupils at risk of anaphylaxis.
- 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 have access to them via first aiders at school. Pupils with prescribed ADs have two AD's in school and these stay at school. Parents are responsible for ensuring that they are in date.

The devices are stored in the following places at Bartons:

Epi-pens (AD's) are stored in a named bag in the school office. The spares are locked away in the First-aid cupboard in the school office.

A first-aider will take any AD's on a school trip or when leaving the school site.

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.

If an AD is used, an ambulance will be called. Written records will be kept and the parents will be informed.

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 AD's and an emergency asthma reliever inhaler and ensuring they are stored according to the guidance.

Spare AD's will be purchased from recommended pharmacies. There will be two spare devices locked in the first-aid cupboard in the school office.

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

First-Aiders on school trips will carry the AD's and will stay close to the children.

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, 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 the headteacher and SENCo. 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. If a pupil receives medical attention then a RIDDOR form will be submitted to the LA.

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 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.

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')

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.

11. Wellbeing

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

The arrangements set out in this policy will be monitored by the allergy safety lead.

The governing board will review and approve this policy annually, or more frequently if a serious incident or 'near miss' identifies an area for improvement.