AdAstra Academy Trust

Allergy and Anaphylaxis Policy 2026-2027

WORKING TOGETHER FOR CHILDREN

Contents

1. Statement of Intent

The Trust Board (Trustees), believe that ensuring the health and welfare of staff, pupils and visitors is essential to the success of the Trust and is committed to ensuring that those with medical conditions, including allergies and those at risk of a severe reaction (anaphylaxis), are supported in all aspects of Trust life.

The Trustees retains overall accountability for this policy and its effective implementation. Under the Trust Scheme of Delegation, the Board have delegated strategic functions to the Resources, Audit and Risk committee of Trustees, with a specific remit to monitor the implementation of this policy across all schools, as well as compliance with relevant statutory responsibilities and sector guidance. The Scheme of Delegation also defines that the Chief Executive officer (CEO) has overall operational responsibility for this policy across the wider Trust organisation, whilst Headteachers have operational responsibility within their own schools.

The Trustees will

- Ensure appropriate arrangements are in place across the Trust to support pupils with medical conditions, in line with statutory guidance, and hold leaders to account for effective implementation.
- Ensure this policy is regularly reviewed and updated to reflect current legislation and best practice.
- Adhere to legislation and statutory guidance on supporting pupils with medical conditions, including the administration of allergy medication and adrenaline auto-injectors (AAIs).
- Ensure all staff, including temporary and supply staff, are trained and confident in implementing this policy, including Individual Healthcare Plans and emergency procedures.
- Ensure Individual Healthcare Plans (IHPs) are in place and regularly reviewed for pupils with serious allergies.
- Identify and minimise risks to pupils with allergies through appropriate assessment and control measures.
- Promote awareness of allergies and an inclusive culture across the Trust, with any allergy-related bullying addressed in line with the anti-bullying policy.
- Ensure the Trust is appropriately insured and that staff understand their cover when supporting pupils with medical conditions.

Whilst we will endeavour to ensure our Trust provides a safe environment for all, we cannot guarantee our Trust will be allergen-free.

This policy applies to all relevant Trust activities and is written in compliance with all current UK health and safety legislation and has been consulted with staff and their safety representatives (Trade Union and Health and Safety Representatives).

2. Equality & Sustainability Impact Assessments

This section must be completed by the Trust before policy approval. It ensures compliance with the Public Sector Equality Duty and supports sustainability goals.

Equality impact assessment

Question	Response
Could this policy disadvantage any group with protected characteristics (e.g., SEND pupils, staff with disabilities, ethnic minorities)?	No – this policy is designed to ensure inclusivity for anyone with allergies.
If yes, what steps will you take to prevent this? (e.g., reasonable adjustments, alternative formats)	n/a
How does this policy actively promote inclusion? (e.g., accessible communication, staff training)	Clear policy and procedures, staff training, governance oversight

Sustainability impact assessment

Question	Response
Does this policy help reduce environmental impact (e.g., energy use, waste, carbon footprint)?	No
Could this policy increase resource use or waste?	Yes, this could increase the need for resources, but this is largely dependent on the number of people with allergies, and the Trust has a legal responsibility to safeguard children and adults in their care with allergies.
What actions will you take to improve sustainability? (e.g., digital processes, energy-efficient equipment)	Streamline policies and procedures to reduce the need for individual schools to do this. Share learning to ensure policies and procedures remain up to date and reflect current legislation and best practice.

3. Aims and Objectives

This policy outlines Ad Astra Academy Trust's approach to allergy management, in line with the Department for Education's statutory guidance, Allergy safety in schools, published in July 2026, and the related statutory guidance on supporting pupils with medical conditions at school. It also reflects the allergy safety duties introduced by the Children's Wellbeing and Schools Act 2026.

The statutory allergy safety framework requires schools to have and publish an allergy safety policy, support pupils with allergies through appropriate planning, provide allergy awareness training for staff, identify pupils who require Individual Healthcare Plans, and record and learn from serious allergy-related incidents and near misses.

This policy outlines how the whole-school community works to reduce the risk of an allergic reaction occurring, and the procedures in place to respond effectively if one does. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy-aware school.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside the Supporting Pupils with Medical Needs Policy.

This Allergy Awareness Policy will be published on the school website and made available to parents and carers.

4. What is an Allergy?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

An allergy is different to an intolerance. Whilst an intolerance may cause uncomfortable symptoms it does not involve the immune system.

The Trust recognises that allergies may arise from food, medication, insect stings, airborne allergens and contact allergens. Risk assessments and support arrangements will be developed proportionately according to the individual needs of the affected person.

5. Definitions

Name	Description
Anaphylaxis	Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.
Allergen	A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens. Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat. There are 14 allergens required by UK law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame

Name	Description
Adrenaline Auto-Injector (AAI)	Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAIs, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy we will refer to them as EpiPen.
Allergy Action Plan	This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.
Asthma	Asthma is a common, long-term condition which effects the lungs. People with asthma have airways that are more sensitive and can become inflamed and narrow on exposure to certain triggers. This can lead to difficulty in breathing.
Asthma Action Plan	This is a document filled out by a healthcare professional, detailing a person's asthma, information about triggers, symptoms, medicines to be used if they have asthma symptoms, and when to seek emergency help when they have an asthma attack
Designated Allergy Lead	The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff. This is referred to as the named senior leader in the statutory guidance.
Emergency Response Plan	A document (also known as a Critical Incident Plan) that outlines a school's procedure for managing an emergency and should be fit for purpose to manage a serious allergic reaction (anaphylaxis).
Eurneffy	(also known as Neffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector.
Individual Healthcare Plan (IHP)	A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.
Risk Assessment	A detailed document outlining an activity, the risks it poses and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.
Spare Adrenaline Devices	Schools may purchase spare adrenaline auto-injectors for emergency use. These are held as back-up where a pupil's own prescribed device is not immediately available or is not working and may also be used in exceptional circumstances to save life where anaphylaxis is suspected. Spare devices do not replace the requirement for pupils at risk of anaphylaxis to have their own prescribed medication available at all times.

6. Roles and Responsibilities

Ad Astra Academy Trust and its constituent schools take a whole-school approach to allergy management.

6.1. The Trust Board

The Trust Board has ultimate organisational accountability for health and safety matters, including allergy awareness and management of associated risks. Via their Resources, Audit and Risk committee, they will ensure the Allergy and Anaphylaxis Policy is reviewed at least annually, or after any operational changes or significant allergy related incidents. This will ensure that the provisions in this policy remain appropriate.

The Resources, Audit and Risk committee of the Trust Board will also ensure that adequate resources, systems and competent persons are in place to support the safe management of allergies and anaphylaxis across the Trust, in line with the Trust's Scheme of Delegation. They will receive reports on allergy-related incidents, training compliance, and identified risk trends to inform strategic oversight.

6.2. The Chief Executive Officer (CEO)

The CEO is responsible for ensuring that this policy and associated arrangements are implemented across all schools within the Trust and that operational arrangements reflect the Trust's requirements. The CEO will

- ensure that communication and reporting systems are in place so that allergy-related incidents, near misses, and emerging risks are reported to the Resources, Audit and Risk Committee of the Trust Board.
- Will ensure that where catering services are centrally procured, that contracted services comply with the Trust's allergy management requirements and will ensure contractors are appropriately vetted and monitored.
- Ensure mechanisms are in place to monitor the effectiveness of this policy, including staff training, compliance and implementation across the Trust

To support this process, the CEO may delegate operational responsibility to members of the central Trust team, however they will retain overall responsibility.

Note that individual Headteachers remain responsible for the day-to-day implementation of this policy at their school (see below).

6.3. Headteacher

- The Headteacher is responsible for the day-to-day implementation of the Allergy Awareness Policy within their school and for ensuring effective delivery of arrangements to support pupils with medical conditions, including working with the designated allergy lead, ensuring allergy related incidents, near misses, and concerns are recorded and reported via the

Trust's designated reporting systems and escalated as required to the Local Governing Body and Trust Board.

- The Headteacher will appoint a member of the Senior Leadership Team with school-level operational responsibility for allergy safety. This individual will oversee implementation of this policy, monitor compliance, review incidents and near misses, and provide reports and information to key stakeholders as determined by the Headteacher.
- Ensure suitable and sufficient risk assessments are carried out to identify, consider and manage the allergy needs of students and staff and these are reviewed regularly and following any significant changes or incidents.
- Ensure a central allergy register is established, maintained, and made accessible to relevant staff, including for educational visits, staff cover and risk assessment purposes.
- Ensure that Individual Health Care Plans (IHPs) and allergy action plans are implemented and kept under review for students diagnosed with serious allergies. This includes ensuring all staff are aware of the Trust's allergy and anaphylaxis policy and procedures.
- Ensure all staff including volunteers and contractors are appropriately trained in allergy and anaphylaxis awareness and emergency response and understand their role in allergy management (including what activities need an allergy risk assessment). This training will be refreshed at least annually, or more regularly where a need is identified.
- Ensure that they as the Headteacher, alongside other staff they appoint internally to assist in allergy safety across the school and including the Designated Allergy Lead (e.g. the senior leadership team), have an appropriate allergy and anaphylaxis qualification, which is more enhanced than simple 'awareness', and they keep this training up to date to ensure they remain competent to perform this role. The Headteacher is responsible for ensuring that appropriate staff have this more enhanced qualification to make sure there is sufficient staffing resilience to take into consideration times when staff may not be in the school building or there is an educational trip or visit to an external site.
- Ensure that catering arrangements meet the medical and dietary needs of pupils with allergies, in line with their Individual Healthcare Plans and Allergy Action Plan. This extends to all food, including food consumed beyond school meals in the dining hall and will include (but is not limited to), breakfast clubs, after school clubs, tuck shops, food lessons, birthday treats, school fairs and educational visits and trips.
- Ensure any bullying incident related to an allergy is treated seriously, like any other bullying and those with allergies are not excluded from any school activities.
- Report specified incidents to the Health and Safety Executive (HSE), when necessary.
- Ensure that all staff receive regular updates on allergy risks and changes to pupils' Individual Healthcare Plans/Allergy Action Plans.
- Ensure that contractors working on site are aware of relevant allergy controls and comply with the requirements of this policy as appropriate.

6.4. Named Allergy Governor

The Named Allergy Governor for Brougham Primary School is Sharon Illingworth.

They work in partnership with the Designated Allergy Lead to ensure allergy safety is overseen at Local Governing Body level. They are responsible for

- Ensuring allergy-related risks are included on the school's risk register and actively managed by the Local Governing Body.
- Providing governance oversight of this Allergy and Anaphylaxis Policy, ensuring it is reviewed at least annually and published on the school's website.
- Acting as the Local Governing Body's named point of contact for allergy-related matters.
- Satisfying themselves that the school's allergy management arrangements meet legal and statutory requirements and reflect best practice.
- Receiving regular updates from the Designated Allergy Lead and ensuring the Local Governing Body is appropriately sighted on allergy compliance.
- Reviewing records of allergic reaction incidents and near-misses and ensuring the school acts on any learnings to reduce the risk of future incidents.

6.5. Designated Allergy Lead

The Designated Allergy Lead for Brougham Primary School is Rebecca Carroll.

They are a member of the Senior Leadership Team & SENDCO They report to the Headteacher and are responsible for

- Leading the publication and implementation of this Allergy and Anaphylaxis Policy at school level including ensuring staff, pupils and parents have an appropriate awareness of this policy and other related procedures.
- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy.
- Taking decisions on allergy management across the school.
- Championing and practising allergy and anaphylaxis awareness across the school.
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management.
- Ensuring allergy information is recorded, up-to-date and communicated to all staff including Allergy Register, Allergy Management Plans and or Individual Health Care Plans.
- Making sure all staff are appropriately trained, have good allergy awareness and understand their role in allergy management (including what activities need an allergy risk assessment).
- Regularly reviewing and managing the school's stock of spare adrenaline devices (via risk assessment they will check the school has an appropriate number for the setting, that they hold the correct dose, they are in date, that spare adrenaline pens are stored appropriately and are in the appropriate locations) and ensuring staff know this information.

- Maintaining an adrenaline device register to include adrenaline devices prescribed to pupils and the school's stock of spare adrenaline devices, including brand, dose and expiry date. The location of spare adrenaline devices should also be documented.
- Replacing the spare adrenaline pens when necessary.
- Keeping a record of any allergic reactions or near-misses via the online Trust accident/incident form on Teams, reporting these to the appropriate authority (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings and actions are implemented and shared.
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy and communicating any proposed changes to the Trust Chief Operating Officer to ensure a consistent approach to allergy and anaphylaxis across the Trust.
- Regularly reviewing and updating the school allergy and anaphylaxis school-level operational arrangements as appropriate (in conjunction with the Headteacher), to ensure these remain relevant and effective.
- Ensuring there is an anaphylaxis drill at least annually and that lessons learned are used to update procedures as appropriate.
- Working with HR to keep an updated list of staff with allergies (and creating an individual healthcare plan if necessary) and ensuring arrangements are in place to support them.
- Providing regular updates to the Local Governing Body and Trust Board to ensure governance oversight and compliance.

6.6. School nurse

School Nurse for Brougham Primary School is K Sailsbury

The school nurse is responsible for

- Collecting and coordinating paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families for children with allergies (this is likely to involve liaising with school staff who are responsible for admitting pupils into school).
- Supporting the Designated Allergy Lead with disseminating this information to all school staff, including those not directly employed by the Trust e.g. catering and cleaning teams, supply staff, volunteers and external organisations that run clubs.
- Supporting the Designating Allergy Lead to ensure the information from families is up-to-date and reviewed annually (at a minimum).
- Coordinating medication with families. While it is a parent/carer responsibility to ensure medication is up to date, the school nurse should also have systems in place to check this and notify parents when they see the expiry date is approaching.
- Supporting the Designating Allergy Lead to maintain an adrenaline device register.

6.7. School Staff who have a role in admitting pupils into school (Admissions Team)

At Brougham Primary School the staff in this team are the Headteacher, School Inclusion Officer, School Business Manager, School Administrator, SENDCO/Designated Allergy Lead, Preschool Manager and Early years Lead)

The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity (this should be in place before a school visit, an open day/taster day if food is offered or likely to be eaten.
- There is a clear structure in place to communicate this information to the relevant parties (i.e. catering team).
- Parents/Carers or any visitors are informed of catering arrangements prior to any admission events.
- Plans are made for emergency medication if the child is to be left without parental supervision.
- Where appropriate, there is liaison with the child's previous school, or future school to ensure a smooth transition between settings in relation to allergy management.

6.8. All staff

All school staff, including teaching staff, support staff, external contracted staff, supply and occasional staff (for example external sports coaches, and those running breakfast and afterschool clubs are responsible for:

- Championing and practising allergy awareness across the school.
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed.
- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to.
- Ensuring they are familiar with any relevant pupils' Individual Healthcare Plans (IHPs) and allergy action plans and are able to recognise the symptoms of an allergic reaction and take appropriate action.
- Completing accident reports for all incidents they attend to where a first aider is not called.
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate.
- Ensuring pupils always have access to their medication or carrying it on their behalf [depending on the age of the pupils and the management of adrenaline pens in the school].

- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training.
- Taking part in allergy and anaphylaxis training as required. Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager.
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times.
- Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy.
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the Designated Allergy Lead.
- Ensuring that pupils have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site, e.g. for a match or trip.
- Informing the Headteacher and the Designated Allergy Lead of any personal specific health conditions or allergy needs.
- Ensuring surfaces are appropriately cleaned before and after eating outside of the main dining areas to reduce the risk of allergen exposure. (e.g. cooking lessons in DT or eating birthday cake in classroom etc).
- Consistently enforce the rule that pupils are prohibited from sharing food.
- Ensuring prompt communication of any concerns, incidents or changes relating to pupils' allergies to the Designated Allergy Lead or other appropriate member of staff as determined by the Headteacher.

6.9. <u>All parents</u>

All parents and carers (whether their child has an allergy or not) are responsible for

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies.
- Providing the Designated Allergy Lead with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema.
- Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising events.
- Refraining from informing the school that their child has an allergy or intolerance if this is a preference or dietary choice.
- Encouraging their child to be allergy aware.

6.10. Parents of children with allergies

In addition to section 5.9 above, parents and carers of children with allergies must

- Notify the school of any allergies that their child has via a signed document listing all relevant information.
- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan.
- If applicable, provide the school or their child with two labelled adrenaline devices and any other medication, for example antihistamine (with a dispenser, i.e.. spoon or syringe), inhalers or creams.
- Ensure medication is in-date and replaced at the appropriate time.
- Ensure their child has access to their allergy medication, including two adrenaline devices if prescribed, on the journey to and from school.
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too.
- Provide the school with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management.
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.
- Attend any meeting as required to share further information about their child's allergy to assist in planning for this and completion of an Individual Healthcare Plan.
- If an episode of anaphylaxis occurs outside of the school, the school must be informed.

6.11. All pupils

All pupils at the school should

- Be allergy aware.
- Understand the risks allergens might pose to their peers and respect measures to support them.
- Learn how they can support their peers and be alert to allergy-related bullying.
- Older pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency.
- Where appropriate (in terms of age and/or capability), pupils buying or bringing in food from home should adhere to food restrictions or guidance about any food being brought into school.

6.12. Pupils with Allergies

In addition to section 5.11 above, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk (depending on age and capability).
- Avoiding their allergen as best as they can.
- Understanding the importance of following the school specific processes of lunch and snack services and how that mitigates risk.
- Understanding that they should notify a member of staff if they are not feeling well or suspect they might be having an allergic reaction.
- Always carrying two adrenaline auto-injectors with them, if age and capability appropriate. They must only use them for their intended purpose.
- Understanding how and when to use their adrenaline auto-injector.
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy.
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies.
- If travelling to school by themselves, ensuring they have their medication with them on the journey to and from school and know how to treat themselves and raise the alarm to get help. This will depend on age and capability.

6.13. Contractors & Visitors

All Contractors and Visitors will be issued with Allergen Aware Information Sheet (Appendix 4) on entry to the building.

As part of the Authorisation to Works Process an Allergen Aware Information Sheet will be sent to contractors in advance of the works being commenced to ensure their activities do not introduce or increase allergy risks within the Trust's premises (please see appendix 4)

Ensure a high standard of hygiene is maintained whilst in Trust premises to minimise the risk of allergen contamination. If any visitor or contractor discovers than area might be contaminated, then this must be reported to the Headteacher (or another member of staff), without delay

Visitors and contractors should inform the school office or their host on arrival if their work, materials, food, equipment or personal health needs could introduce or increase allergy risks on site. Any concerns must be escalated to the Headteacher or Designated Allergy Lead without delay.

7. Information & Documentation

7.1. Register of pupils with an allergy

The school has a register of pupils and a record of staff who have a diagnosed allergy. This includes children and staff who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.

7.2. Individual Healthcare Plans

Each pupil with an allergy has an Individual Healthcare Plan. The information on this plan includes:

- Known allergens and risk factors for allergic reactions;
- A history of their allergic reactions;
- If the pupil has asthma and any other medical conditions and necessary detail;
- Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc;
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis;
- A photograph of each pupil; and
- A copy of their Allergy Action Plan.

8. Assessing Risk

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking;
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk;
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. The school will ensure compliance with the Equality Act 2010.

9. Food – including mealtimes & Snacks

9.1. Catering in school

The school is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence is carried out with regard to allergen management when appointing catering staff;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training this includes annual refresher training.
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- Ensuring that up-to-date information on staff and pupil allergies is received, maintained and used to inform safe food preparation and service. The school & catering team have robust procedures in place to identify pupils with food allergies, each classroom has a list of children with a food allergy and the school kitchen has a poster displaying the names of children with an allergy and their allergens. Children who have allergies and eat a school meal are given a menu so parents can choose the meal they wish for their child to eat. The allergy register also includes pupils who bring packed lunches from home. This ensures that, should a packed lunch be unavailable or unsuitable (for example, if it is damaged or contaminated), the catering team can safely provide an appropriate replacement meal without compromising the pupil's dietary requirements.
- The catering team will endeavour to provide varied meal options to students and staff with allergies;
- A comprehensive allergen information matrix poster is available for all dishes prepared by the school catering service. This identifies any of the 14 recognised allergens present in the food and highlights any ingredients that may contain allergens, indicated by a double asterisk (**). Additional ingredient and allergen information is available upon request.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Where changes are made to ingredients the Head Cook would remove this item from service. The management team are notified of any changes to ingredients as they occur and will update the Head Cook as required and source alternative products if needed.
- The school kitchen follow any Precautionary Allergen Labelling or "May Contain' labelling and ensure school staff are aware. They will ensure those children with allergies do not eat any products that may contain their allergen.
- School do not serve any foods that contain nuts.
- Food provided at breakfast club and after school club will follow these procedures.

- Staff will, when providing snacks at After School Clubs or selling items at a Tuck Shop, eliminate nuts, and food items with nuts as ingredients, as far as possible, not including foods which are labelled 'may contain traces of nuts'.
- Ensuring that cleaning regimes practices support the reduction of allergen risks, including appropriate cleaning of surfaces of dining tables and kitchen surfaces each day following service.
- The Early Years settings should adhere to new Early Years Foundation Stage statutory guidance.

9.2. Food brought into school

Birthday cakes or other food brought into school for sharing will only be accepted where they are shop bought, sealed in the original packaging, and full ingredient and allergen information is available. Foods containing nuts as an intentional ingredient must not be brought in for sharing. Where a product has precautionary allergen labelling, such as "may contain nuts," staff must check the relevant pupil allergy information and must not provide the food to any pupil whose IHP or Allergy Action Plan identifies a risk from that allergen or precautionary labelling.

9.3. Food bans or restrictions

- This school is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food;
- We try to restrict allergens as much as possible on the site and check all foods coming into the kitchen; and have advised parents that we are an Allergen Aware school.
- In the event of staff being made aware to a product being brought in to school that contains an allergen, staff will ensure this item is kept in a safe place and given back to parents who will be informed of our school's Allergy Policy.
- Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

9.4. Food hygiene for pupils

- The school will encourage pupils to wash their hands with soap and warm water before and after eating;
- Sharing, swapping or throwing food is not allowed;
- Water bottles and packed lunches should be clearly labelled

10. Education Visits & Sports Fixtures

- Staff leading the trip will have a register of pupils with allergies and details of their medication. Staff should notify the trip leader of any allergies;

- Allergies will be considered on the risk assessment and catering provision put in place and staff will adhere to the Allergy Checklist for Educational Visits outlined in the Educational Visits Policy (see Appendix 3).
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff accompanying the trip will be trained to recognise and respond to an allergic reaction;
- Allergens will be clearly labelled on catered packed lunches.
- Any pupil with a prescribed auto-injector must carry this on any educational visit.
- Where food is provided by a third-party caterer on a day or residential trip, they will be provided with details of all known allergies of the pupils attending the educational visit.
- Where educational visits involve cooking, food preparation, animal contact, environmental allergens, or food provided by third parties, allergy risks will be considered during planning and risk assessment. Appropriate control measures will be implemented and reasonable adjustments made to ensure pupils with allergies are able to participate safely and are not excluded from activities
- Educational visit risk assessments will consider exposure to food, contact and airborne allergens, including animal contact, environmental allergens, pollen, and activities that may increase allergen exposure. Appropriate control measures will be implemented to ensure the safe inclusion of affected pupils.
- See Adrenaline devices section for School Trips and Sports Fixtures.

11. <u>Insect Stings</u>

Those with a known insect venom allergy should:

- Avoid walking around in bare feet or sandals when outside and when possible keep arms and legs covered;
- Avoid wearing strong perfumes or cosmetics; and
- Keep food and drink covered.

Site Staff and Moore H Moore (Forest School Lead) or other person nominated by the Headteacher, will monitor the grounds for wasp or bee nests. Pupils and staff should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid the area until it has been assessed and managed.

The bee hives or other managed insect habitats that are located on the school site, are covered by a specific risk assessment and emergency arrangements, including access to appropriate medication and trained staff. Parents and carers will be informed where relevant.

12. Animals

It is normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic;
- If an animal comes on site a risk assessment will be done prior to the visit;
- Areas visited by animals will be cleaned thoroughly;
- Anyone in contact with an animal will wash their hands after contact;
- School trips that include visits to animals will be carefully risk assessed.
- When animals visit the school site this will be carefully risk assessed.

13. Allergic Rhinitis /Hay Fever

The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites. Precautions regarding the prevention of seasonal allergies include ensuring that the school field is not mown whilst pupils are outside.

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

If necessary, staff will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

Pupils with severe 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.

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 caretaker who is responsible for liaising with the Headteacher for its safe removal.

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

14. Inclusion & Mental Health

Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- Staff are alert to the possibility of allergy-related bullying and are proactive in safeguarding the wellbeing and inclusion of pupils with allergies;
- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip;
- Pupils with allergies may require additional pastoral support including regular check-ins from their teacher etc;

- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives; and
- Bullying related to allergy will be treated in line with the school's anti-bullying policy.
- Uniform policies take into account that children may need emergency medication near them at all times.

15. Adrenaline Devices

See the government guidance on Adrenaline Devices in Schools.

15.1. Storage of adrenaline devices

- Pupils prescribed with adrenaline devices will have easy access to two, in-date devices at all times;
- Each pupils adrenaline devices will be located in their classrooms and will accompany them on any trip they attend.
- Spot checks will be made to ensure adrenaline devices are where they should be and in date;
- Adrenaline devices must not be kept locked away;
- Adrenaline devices should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator); and
- Used or out of date devices will be disposed of as sharps.

15.2. Spare adrenaline devices

- This school holds spare adrenaline auto-injectors in accordance with current government guidance and the school's allergy risk assessment (2 for Under 6 Year Olds and 2 for Over 6 Year Olds). The number, dose and brand of devices held will be reviewed regularly by the Designated Allergy Lead and recorded on the adrenaline device register.
- The locations of spare adrenaline auto-injectors are clearly signposted and communicated to staff. These locations are: SIO Office
- Spare devices must be accessible in an emergency and must not be locked away. Staff must know where they are stored and how to access them quickly. Use of a spare device must be recorded and followed up with parents/carers, emergency services where applicable, and the Designated Allergy Lead.

The Designated Allergy Lead is responsible for:

- Deciding how many spare devices are required
- What dosage is required, based on the Resuscitation Council UK's age-based guidance (see page 11);

- Which brand(s) to buy. Schools are recommended to buy a single brand if possible to avoid confusion;
- The purchasing of spare adrenaline devices which can be obtained at low cost from a local pharmacy.
- Distribution around the site and clear signage.

15.3. Adrenaline devices on off-site activities

- No child with a prescribed adrenaline devices will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them;
- Adrenaline devices will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms;
- Adrenaline devices will be protected from extreme temperatures;
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and
- Consider whether to take spare adrenaline devices to off-site activities. This should be recorded as part of the risk assessment process.

16. Responding to an Allergic Reaction/Anaphylaxis

See appendix 2 on recognising and responding to an allergic reaction

If a pupil has an allergic reaction

- Treat the pupil in accordance with their Allergy Action Plan and/or Individual Healthcare Plan (IHP).
- If in doubt, give adrenaline. Anaphylaxis can occur without initial mild symptoms, and treatment must not be delayed while waiting for all symptoms to appear.
- If anaphylaxis is suspected, administer adrenaline without delay using the pupil's own device if immediately available, or the school's spare device if needed, and call 999 stating 'anaphylaxis'.
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them.
- Use pupil's own prescribed medication if immediately available.
- Pupil can administer the adrenaline pen themselves [if able to] or a member of staff can administer pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline.
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen.
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain

anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life.

- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given.
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better.
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.

17. Training

The school is committed to ensuring that all staff receive regular (at least annual) allergy awareness training. This training should cover all staff, including teaching staff, support staff, catering staff, site staff and others who may oversee children at breakfast or after-school clubs.

This training will cover:

- Understanding what an allergy is.
- How to reduce the risk of an allergic reaction occurring.
- How to recognise and treat an allergic reaction, including anaphylaxis.
- How to treat an asthma attack using a reliever inhaler.
- How the school manages allergy, for example understanding the school's Allergy Safety Policy.
- How to check who has an allergy, and how to use an IHP and Allergy or Asthma Action Plan.
- Where adrenaline devices are kept (both prescribed devices and spare devices) and how to access them.
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying.
- Understanding food labelling.
- How to report an allergic reaction or near miss.
- Taking part in an anaphylaxis drill.
- The school will carry out an anaphylaxis drill at least annually. This involves an exercise simulating an event where a pupil or member of staff has an allergic reaction and testing the whole school response.

18. Asthma

Refer to page 13 of the Supporting pupils with Medical Needs Policy for further details on asthma management in school. The school understands that it is vital that pupils with allergies keep their asthma well controlled. Asthma can exacerbate allergic reactions, and poorly managed asthma increases the severity of an allergic reaction.

19. Reporting Allergic Reactions

The school will log allergic reaction incidents and near-misses by completing the Trust online accident/incident report form (based on the Judicium template) if the person required medical treatment.

All incident reports should be shared as follows

- the pupil's parents or carers, who will be given the opportunity to discuss the incident and contribute their views to the review
- the Named Allergy Governor and the governing body, so they can consider what lessons to learn and whether policy changes are required.
- Incidents arising directly from a work activity that result in death or immediate hospitalisation must be reported to the Health and Safety Executive under RIDDOR (please see advice from the Trust Estates Manager or another member of the Trust central team).
- The Headteacher will notify the Trust's CEO of all serious allergy related incidents.
- Any learning from an incident should be shared appropriately with staff so they can act on it.
- Following any incident or near miss the school will meet with the child and their parents/ carers to ensure they are confident the setting remains safe.
- The school recognises the impact of an incident or near miss not just on the individual and their family, but also on staff who responded and children who witnessed it and will offer appropriate support.

20. Appendix 1: Managing Allergic Reactions

Allergic Reactions: Recognise, Respond, Escalate

Allergic Reactions Vary

- **Unpredictable;** can be affected by illiness or hormonal fluctuations.
- You cannot assume someone will react the same way twice, even to the same allergen.
- Reactions are **not always linear.** They don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

Mild to Moderate Symptoms


Swollen lips, face or eyes


Itchy or tingling mouth


Hives or itchy rash


Abdominal pain


Vomiting


Change in behaviour

Response

1. Stay with the pupil
2. Call for help
3. Locate adrenaline pens
4. Give antihistamine
5. If any signs of anaphylaxis are **present,** ***give adrenaline*** without delay
6. Make a note of the time

Phone parent or guardian

Continue to monitor the pupil for at least 60 minutes in case the reaction gets worse.

Serious Allergic Reactions / Anaphylaxis

- **Anaphylaxis** is uncommon and children experiencing it aalmost always fully recover.
- In rare cases, **anaphylaxis** can be fatal.
- Always treat **anaphylaxis as a time-critical medical *emergency*.**
- *Usually occurs within 20 minutes of eating food but can begin 2–3 hours later.*
- *Can occur even if there has been no previous allergic reaction, or if previous reactions were mild or moderate.*

ANAPHYLAXIS = TIME-CRITICAL MEDICAL EMERGENCY

21. Appendix 2 – Responding to Anaphylaxis

Responding to Anaphylaxis

Symptoms of Anaphylaxis

A – Airway

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen tongue

B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

C – Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.

DELIVERING ADRENALINE

1. **Treat the patient where they are.** Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. **Inject adrenaline** into the **upper outer thigh** according to the manufacturer's instructions. Pupils may be able to do this themselves, but some will require or want adult support. Whilst all members of staff should be trained, in an emergency, **anyone** can administer **adrenaline**.
5. Make a note of the **time** you gave the first dose.
6. **Call 999** for an **ambulance**, or get someone else to do this while you give adrenaline. Tell them you have given adrenaline for anaphylaxis.
7. Stay with the patient and do not let them get up or move, even if they are feeling better, as this can cause cardiac arrest.
8. Call the pupil's emergency contact.
9. If their **condition** has not improved or symptoms have **got worse**, **give a second dose of adrenaline after 5 minutes**, using a second device. Call 999 again and tell them you have given a second dose and to check that help is on the way.
10. **Start CPR** if necessary.
11. Hand over used devices to paramedics and remember **to get replacements.**

Anyone who has had suspected anaphylaxis and received adrenaline must ***go to hospital****, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.*

22. Appendix 3 – Allergy Safety on Educational Visits

Allergy Safety on Educational Visits

Full visual checklist for safer planning

START HERE → Plan early → Check medication → Assess activity risk → Manage food safely

1. PLAN	• Talk through trip with parents, carers and pupils with allergies. • Liaise with travel company and venue. • Ensure staff going on the trip have refreshed allergy and adrenaline pen training. • For trips with older pupils, consider training pupils to recognise symptoms of an allergic reaction and how to respond. • Brief staff on the emergency plan for an allergy-related incident and talk through scenarios, such as being in an area without phone reception. • Complete the trip risk assessment and share it with staff and relevant families. • Check the location of the nearest hospital to your destination in case of a serious allergic reaction.
2. MEDICATION	• Make sure you know which pupils attending the offsite activity need allergy medication. • Check through pupils' Allergy Action Plans to remind yourself of the contents. • Remind parents, carers and pupils that they will need to take medication on the trip. • Decide who will carry each pupil's medication: the pupil or a staff member. If staff carry it, make sure they will always be with the pupil. If the pupil carries it, decide who will check it is there. • Check pupils prescribed adrenaline pens have two in-date devices and consider taking school spares. • Make sure the medication travels in the main part of the bus or plane, not in the hold. • If travelling by plane, remind parents and carers of pupils prescribed adrenaline pens to obtain a medical certification letter from a doctor or hospital confirming the need for adrenaline onboard. • Think through storage of adrenaline during the journey and at the destination, ensuring it is not too hot or too cold.
3. ACTIVITIES	• Consider what you will be doing on the school trip and whether it could pose a risk to pupils with allergies. • Assess activities such as attending a food factory, a festival, a farm or watching science experiments using food. • Remember that food may not be eaten, but the risk should still be assessed.
4. FOOD	• Confirm venues can cater for all students as required and discuss eating arrangements. • Remind families to consider allergies if providing a packed lunch. • Remind students that they must not share or swap food. • Pack wipes to clean surfaces and seats before pupils sit down.

KEY MESSAGE

Allergy safety depends on early communication, trained staff, accessible medication, risk-assessed activities and safe food arrangements.

23. Appendix 4 – Contractor/Visitor Allergy Awareness Information