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CHANDLERS RIDGE ACADEMY

ALLERGY SAFETY POLICY

OCTOBER 2026

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Review Cycle: Annually
Responsible Body: Trust Board

Version Control

Review Date	Updates

Lowfields Avenue, Ingleby Barwick, TS17 0RJ

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1. Aims

The Trust recognises that effective allergy management requires leadership, training, clear accountability and inclusion of pupils with allergies across all aspects of school life.
The intent of this policy is to minimise the risk of any child suffering allergy-induced anaphylaxis whilst at school.

The underlying principles of this policy include;

- Keep pupils and staff with allergies safe, included and supported.
- Ensure clear roles and responsibilities, reliable documentation, and effective communication.
- Provide staff training and robust emergency procedures.
- Embed proportionate controls around food, curriculum activities and visits.

Culture of Allergy Safety in School

2. Roles and responsibilities

Designated Allergy Lead (DAL)
The Designated Allergy Lead on SLT is Naomi Bryant.
They report into Richard Thompson.

Key responsibilities include:

- **Ensuring the safety, inclusion and wellbeing of pupils and staff with allergies**, so that no individual is disadvantaged or placed at unnecessary risk due to their allergy.
- **Providing strategic oversight and leadership for allergy management across the school**, including decision-making in relation to reasonable adjustments, control measures and responses to identified risks.
- **Promoting, championing and modelling good allergy awareness and safe practice** throughout the school community.
- **Acting as the overarching point of contact** for staff, pupils, parents and carers in relation to allergy-related concerns, queries or incidents.
- **Ensuring that allergy information is accurately recorded, kept up to date and effectively communicated to all relevant staff.**
  While responsibility for collation or administration of this information may be delegated

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(for example, to a school nurse, SEND lead or administrator), overall responsibility remains with the school.

- **Ensuring all staff receive appropriate information, instruction and training** to develop good allergy awareness and to understand:
    - their individual roles and responsibilities;
    - how to recognise signs of an allergic reaction or anaphylaxis;
    - what actions to take in an emergency; and
    - when an activity requires an allergy-specific risk assessment (e.g. curriculum activities, trips, food handling, special events).
- **Ensuring staff, pupils and parents/carers are aware of the school's Allergy Safety Policy and related procedures.**
- **Overseeing the provision and management of spare adrenaline auto-injectors**, including ensuring that:
    - an appropriate number is available for the setting;
    - the correct doses are held;
    - devices are stored securely but accessibly; and
    - staff are aware of their locations and use.
- **Ensuring that all allergic reactions, incidents and near-misses are recorded and reviewed.**
  Where required, incidents will be reported to the appropriate authority (e.g. under RIDDOR). The circumstances will be investigated and lessons learned shared to prevent recurrence.
- **Regularly reviewing and updating the Allergy Safety Policy**, or sooner where there are changes in legislation, guidance, pupil needs or following a significant incident.

Named Governor

The Named Governor is Becky Ball.

Provides oversight and assurance that systems, training, records and reviews are effective.

Danielle Moore (School Business Manager) is responsible for:

- **Collecting, collating and coordinating allergy-related documentation and information from families**, including Allergy Action Plans and Individual Healthcare Plans (IHPs). This may include liaison with the admissions team to ensure appropriate information is obtained for new pupils prior to or on entry to the school.
- **Supporting the Designated Allergy Lead in disseminating relevant allergy information** to all appropriate staff, including teaching staff, support staff, catering teams, supply or occasional staff, and those running before- and after-school clubs or activities.

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- **Ensuring allergy information provided by families is kept accurate and up to date**, with a formal review taking place at least annually, and sooner where there is a change in medical advice, diagnosis or pupil needs.
- **Coordinating prescribed medication with parents/carers**, ensuring that medication required to be held in school is received, appropriately labelled and stored.
- **Supporting systems to monitor medication expiry dates.** While parents/carers retain responsibility for ensuring medication remains in date, the school administration team should have arrangements in place to:
    - check expiry dates of medicines held by the school; and
    - notify parents/carers in advance where expiry dates are approaching.
- **Maintaining an up-to-date adrenaline auto-injector register**, which records:
    - adrenaline auto-injectors prescribed to individual pupils; and
    - the school's stock of spare adrenaline auto-injectors, including the brand, dose, expiry date and storage location of each paired device.
- **Regularly checking that spare adrenaline auto-injectors are stored in their designated locations**, are accessible in an emergency and remain within their expiry dates.
- **Arranging for the replacement of spare adrenaline auto-injectors** where these have been used, are nearing expiry or are otherwise no longer suitable for use.
- **Supporting the provision of on-site adrenaline auto-injector training**, including:
    - initial training for staff and, where appropriate, pupils; and
    - refresher training as required, for example in advance of educational visits or activities with increased risk.
- **Undertaking any additional allergy-related responsibilities delegated by the Designated Allergy Lead**, within the scope of the role and with appropriate training and support.

Admissions / Admin Team

The admissions team is often the first point of contact where information about a pupil's or visitor's allergy or special dietary requirement is identified. The admissions team will work in partnership with the Designated Allergy Lead to ensure that appropriate arrangements are in place at the earliest opportunity.

Key responsibilities include:

- **Ensuring there is a clear and effective process for capturing allergy and special dietary information** as early as possible during the admissions process. This should be in place prior to:
    - school visits;
    - open days;

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    - taster days; or
    - any other admissions-related events where food is provided or likely to be consumed.
- **Ensuring there is a clear structure for communicating allergy-related information** to all relevant parties, as appropriate, including:
    - the Designated Allergy Lead;
    - the catering provider or catering manager.
- **Providing parents/carers and applicants with clear information about catering arrangements** during admissions events, including how food is managed and what steps are taken to support individuals with allergies.
- **Supporting early planning for emergency arrangements**, including ensuring that appropriate medication and control measures are in place where a child or young person with an allergy is attending an event without parental or carer supervision.

All staff (including agency, volunteers and club leads)

Staff responsibilities include:

- **Championing and practising good allergy awareness** at all times, helping to promote a culture of safety, inclusion and shared responsibility across the school.
- **Reading, understanding and complying with the school's Allergy Safety Policy and associated procedures**, and seeking advice or support from the Designated Allergy Lead where clarification or additional guidance is required.
- **Being aware of pupils (and, where relevant, colleagues) with allergies**, including knowledge of the allergens involved and the control measures in place to reduce risk.
- **Considering the potential risks to pupils with allergies when planning or supervising activities** and assessing whether the use of any allergen is necessary, appropriate or can be avoided. Where required, staff must ensure that an allergy-specific risk assessment is completed.
- **Ensuring pupils have timely access to their prescribed medication**, or carrying medication on their behalf where appropriate, in line with:
    - the age and maturity of the pupil; and
    - the school's arrangements for managing adrenaline auto-injectors.
- **Being able to recognise the signs and symptoms of an allergic reaction, including anaphylaxis**, and responding appropriately in accordance with training and school procedures.
- **Participating in allergy and anaphylaxis training and emergency drills as required**, which will take place at least annually. While the school is responsible for ensuring staff receive appropriate training, any member of staff who is aware they have not received

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allergy training within the previous 12 months must inform their line manager.

- **Consistently considering the safety, inclusion and wellbeing of pupils with allergies**, ensuring that they are not excluded from activities unnecessarily and that reasonable adjustments are implemented.
- **Preventing and responding to allergy-related bullying or harassment**, in line with the school's Behaviour Policy and behaviour procedures.
- **Passing on any allergy-related communication received directly from parents/carers**, to ensure information is recorded and managed appropriately.
- **Ensuring that pupils have their medication and relevant documentation** (Allergy Action Plan and/or Individual Healthcare Plan) when leaving the school site for educational visits, sporting fixtures or other off-site activities.

Parents/carers (all)

Parents and carers play a vital role in supporting the safe and effective management of allergies and anaphylaxis within the school.

Their responsibilities include:

- **Being aware of and understanding the school's Allergy Safety Policy and related procedures**, and supporting the school in promoting the safety, inclusion and wellbeing of pupils with allergies.
- **Providing the school with accurate, timely and comprehensive information about their child's medical needs**, by liaising with the designated school contact (e.g. the school admin team or Designated Allergy Lead). This information should include, as applicable:
    - confirmed allergies and dietary requirements;
    - the nature and history of the allergy;
    - details of any previous allergic reactions or anaphylaxis; and
    - any related medical conditions, such as asthma, hay fever, rhinitis or eczema.
- **Informing the school promptly of any changes** to their child's medical condition, allergy status, prescribed medication or medical advice.
- **Adhering to any food restrictions, controls or guidance implemented by the school** when providing food for their child, including packed lunches, snacks, birthday treats or food supplied for fundraising or social events.
- **Ensuring that information provided to the school about allergies or intolerances is medically accurate**, and not reporting preferences, lifestyle choices or non-medical dietary requirements as allergies or intolerances.
- **Encouraging their child to be allergy aware**, in line with their age and understanding, including recognising symptoms, avoiding known allergens where appropriate, and

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informing an adult if they feel unwell or at risk.

Parents/carers of pupils with allergies

In addition to the points above, the parents and carers of children with allergies should:

- **Work with the school to complete an Individual Healthcare Plan (IHP)** and provide an accompanying **Allergy Action Plan**, completed and signed by an appropriate healthcare professional, where required.
- **Provide the school, or their child (where age-appropriate), with prescribed medication**, including:
    - two clearly labelled adrenaline auto-injectors where these have been prescribed; and
    - any other required medication, such as antihistamines (with a suitable measuring device), inhalers or topical treatments.
- **Ensure that all medication supplied is in date, correctly labelled and replaced promptly** when used or approaching expiry.
- **Ensure their child has access to their allergy medication on the journey to and from school**, including two adrenaline auto-injectors where prescribed.
- **Inform the school immediately of any changes to their child's allergy status, medical condition or prescribed treatment**, and ensuring that relevant documentation (including the IHP and Allergy Action Plan) is updated accordingly.
- **Provide the school with a current photograph of their child** and giving written consent for this to be shared appropriately with relevant staff as part of the child's allergy management arrangements.
- **Support their child to understand their allergy diagnosis**, in line with their age and level of understanding, and encouraging them to:
    - advocate for themselves where appropriate; and
    - take reasonable steps to reduce the risk of an allergic reaction, for example by avoiding foods or substances to which they are allergic and alerting an adult if they feel unwell or at risk.

All Pupils

Pupils are expected to contribute to a safe, supportive and inclusive school environment for everyone, including those with allergies. In line with their age and understanding, pupils are expected to:

- **Be allergy aware** and understand that allergies can be serious and, in some cases, life-threatening.
- **Recognise and respect the risks that allergens may pose to others**, and follow any

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measures, rules or guidance put in place by the school to support pupils with allergies.

- **Show consideration and support towards peers with allergies**, including understanding how their actions may affect others and being alert to, and reporting, any allergy-related bullying or unkind behaviour.
- **Learn how they can help keep others safe**, for example by not sharing food, drinks or utensils where this could pose a risk.
- **Older pupils, where appropriate, will be supported to learn how to recognise the signs of an allergic reaction**, and how to alert staff and assist appropriately in an emergency, in line with school training and guidance.
- **Where pupils are permitted to bring food from home or purchase food independently**, and are of an appropriate age and maturity, they are expected to:
    - check ingredient information where required; and
    - follow any school guidance or restrictions relating to food brought onto the school site.

Pupils with Allergies

In addition to the general responsibilities set out above, pupils with allergies are expected, in line with their age, maturity and capability, to take an active role in managing their condition and keeping themselves safe.

These responsibilities include:

- **Knowing and understanding their own allergies**, and how they can take reasonable steps to reduce personal risk. Expectations will be proportionate to the pupil's age, understanding and ability.
- **Avoiding their allergen(s) as far as reasonably practicable**, and following advice provided by parents/carers, healthcare professionals and the school.
- **Understanding and following the school's procedures for lunches, snacks and food provision**, and recognising how these arrangements help to reduce the risk of an allergic reaction.
- **Informing a member of staff immediately if they feel unwell**, or if they believe they may be experiencing an allergic reaction.
- **Carrying two adrenaline auto-injectors at all times where prescribed**, if this is appropriate for the pupil's age and capability and using them only for their intended purpose.
- **Understanding how and when to use their adrenaline auto-injector**, in line with their Allergy Action Plan and any training provided.
- **Speaking to the Designated Allergy Lead or another trusted member of staff** if they have concerns about school processes, arrangements or systems relating to their allergy.

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- **Raising concerns with a member of staff if they experience, or witness, inappropriate behaviour** related to their allergy, including bullying or teasing.
- **Where pupils are permitted to leave the school site during the school day or are boarding**, understanding what to do if they experience an allergic reaction off school premises.
  This should include:
  - how to treat themselves;
  - how to raise the alarm and seek help; and
  - who to contact in an emergency.
- **Ensuring they have their prescribed medication with them on the journey to and from school**, where this is appropriate for their age and capability.

3. Awareness training

The school is committed to ensuring that **all staff receive regular and appropriate training** to support the safe and effective management of allergies and anaphylaxis. This includes permanent staff, temporary staff, long term supply teachers, peripatetic staff and regular volunteers. It includes catering staff and others who may oversee children and young people at breakfast or after school clubs. Allergy training will be part of the staff induction process.

Allergy and Anaphylaxis Training

- All staff will receive allergy and anaphylaxis training at least annually, to ensure they have a clear understanding of allergies and their role in keeping pupils safe.
- Training will include, as a minimum:
  - **An understanding of what an allergy is**, including common allergens and the potential seriousness of allergic reactions;
  - **Measures to reduce the risk of an allergic reaction occurring**, including everyday control measures and good practice;
  - **How to recognise the signs and symptoms of an allergic reaction**, including anaphylaxis, and how to respond appropriately;
    Staff will be given the opportunity to practise using a training adrenaline auto-injector;
  - **How the school manages allergies**, including:
    - the Emergency Response Plan;
    - key documentation (e.g. Individual Healthcare Plans and Allergy Action Plans); and
    - communication arrangements;
    - **reporting** an allergic reaction or case of anaphylaxis (whether an incident

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or a "near miss").

- **Where adrenaline auto-injectors are stored**, including both:
  - pupils' prescribed medication; and
  - the school's spare adrenaline auto-injectors, and how these can be accessed quickly in an emergency;
- **The importance of inclusion for pupils with allergies**, including:
  - the impact of allergies on mental health and wellbeing; and
  - awareness of, and prevention of, allergy-related bullying;
- **An overview of food labelling requirements**, to support safe food handling and supervision.

Wellbeing

The school recognises that allergies can have a **significant impact on a pupil's mental health and emotional wellbeing**. Pupils with allergies may experience anxiety, stress or low mood related to managing risk, and may be more vulnerable to bullying or social exclusion.

To support pupils effectively, the school will ensure that:

- **No pupil with allergies is excluded from participating in school activities**, whether on the school premises or during educational visits, trips or residential activities. Where necessary, activities will be adapted and reasonable adjustments made to enable safe and inclusive participation.
- **Pupils with allergies are offered appropriate pastoral support**, which may include regular check-ins from their class teacher, particularly where anxiety or wellbeing concerns are identified.
- **The views and experiences of pupils with allergies are considered in advance** of wider school discussions, communications or initiatives relating to allergies or allergy awareness, to ensure messaging is sensitive, proportionate and supportive.
- **Bullying or harassment related to allergies is not tolerated** and will be addressed promptly in line with the school's Behaviour Policy and behaviour procedures.
- **Staff remain alert to the emotional and social impact of living with an allergy**, and will raise concerns through appropriate safeguarding, pastoral or wellbeing channels where additional support may be required.

4. Minimising risk

Allergy Considerations in Activity Planning and Risk Assessment

Allergens can be present in a wide range of activities and environments, including in ways that

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may not be immediately obvious.
The school recognises the importance of proactively identifying and managing these risks.

- **All staff, including visiting staff, volunteers and external providers, must consider allergies when planning and delivering activities** and ensure that relevant risks are identified and addressed through appropriate risk assessments.
- Allergy considerations must be incorporated into risk assessments for all activities, including, but not limited to:
    - **Classroom activities**, such as:
        - arts and crafts involving food packaging or food products;
        - science experiments where allergens may be present; and
        - food technology, cooking or tasting activities.
    - **Animals brought into school**, including visiting animals (e.g. dogs) or activities such as hatching eggs, which may pose an allergen or respiratory risk.
    - **Extra-curricular activities and clubs**, where snacks, food or "treats" may be provided.
    - **Special events and celebrations**, such as cultural days, fundraising events or themed activities where food may be shared or displayed.
- Where food is provided as part of an activity, staff must:
    - ensure that **safe alternatives are available** for pupils with allergies; or
    - consider using **non-food alternatives** that allow all pupils to participate safely.
- **The inclusion of pupils with allergies must be considered alongside safety at all times.** Pupils should not be excluded from activities because of their allergy. Where necessary, activities should be **adapted or reasonable adjustments made** to enable safe participation.
- The school will ensure that arrangements for pupils with allergies are made in accordance with its duties under the **Equality Act 2010**, and that pupils with allergies are supported to participate fully in school life wherever it is reasonably practicable to do so.

5. Food allergy

Catering and Food Allergen Management

The school is committed to providing **safe, inclusive and appropriate food** for pupils, staff and visitors, including those with food allergies.

To support this commitment, the school will ensure that:

- **Appropriate due diligence is undertaken when appointing catering providers or catering staff**, including consideration of their arrangements for allergen management,

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food safety and staff training.

- **All catering staff and any other staff involved in the preparation or handling of food** receive relevant and appropriate **allergen awareness training**, proportionate to their role.
- **Early Years settings will comply with the statutory Early Years Foundation Stage (EYFS) framework**, including the *Safer Eating* requirements.
- **Anyone preparing or handling food for individuals with allergies will follow robust food hygiene, food safety and allergen management procedures**, including controls to prevent cross-contamination.
- **The catering team will be supported to become familiar with pupils who have food allergies**, and the nature of those allergies, with appropriate information shared by the school.
- **Where reasonably practicable, the catering team will provide a range of suitable meal options** for pupils and staff with food allergies, to support inclusion and choice.
- **Robust procedures will be in place to identify pupils with food allergies at the point of food service.**
  These procedures will include at least two methods of identification, for example:
  - a visual check by a member of staff familiar with the pupils with allergies; and
  - access to photographs of pupils with food allergies.
- **Food containing any of the 14 specified allergens will be clearly identified**, and additional ingredient information will be made available on request. Where pupils or staff have allergies to foods outside the main 14 allergens, **additional control measures and communication processes** will be implemented and documented as required.
- **Pre-packed food for direct sale (PPDS)** will comply with current legislation (Natasha's Law), with full ingredient lists and allergen information displayed on the packaging.
- **Any changes to ingredients or recipes that may affect allergen content** will be communicated promptly to pupils with dietary needs and relevant staff. Responsibility for this communication will rest with the catering provider in liaison with the Designated Allergy Lead (or nominated school contact).
- **The school's approach to foods with precautionary allergen labelling** (e.g. "may contain") will be clearly defined and communicated to pupils, parents/carers and staff.
- **Food provided through breakfast clubs, after-school clubs or similar provision** will follow the same allergen management procedures, or equivalent controls where arrangements differ.
- **Any additional catering controls** (for example, avoiding the use of nuts as an ingredient or restricting certain foods) will be clearly documented and communicated.
- **Where food is sold on site**, such as through a tuck shop or vending provision, the school will ensure that:
  - allergen information is available;

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- reasonable measures are in place to support pupils in avoiding their allergens; and
- any agreed food restrictions are applied consistently.

Food Brought into School and Off-Site Activities

The school recognises that food brought into school or consumed during school-related activities can present a risk to pupils with food allergies. Clear arrangements are therefore in place to manage these risks while supporting inclusion and participation.

- **The school will set out and communicate clear expectations regarding food brought onto the school site or taken on school-organised activities**, including educational visits, sporting fixtures and residential trips.
- **Food brought in by pupils, parents/carers or visitors**, including for:
  - birthdays and celebrations;
  - tuck shops;
  - fundraising events;
  - parent/carer events; and
  - food brought into boarding houses (where applicable),

  must comply with the school's allergen management arrangements and any specific guidance or restrictions in place.
- **The school may restrict or prohibit certain foods** where this is necessary to reduce the risk to pupils with allergies. Any such restrictions will be proportionate, clearly communicated and kept under regular review.
- **Where food is provided for whole-school or class-based events**, staff will:
  - consider the needs of pupils with allergies in advance;
  - ensure suitable alternatives are available; or
  - use non-food alternatives where this provides a safer and more inclusive option.
- **Parents/carers are expected to follow school guidance when providing food** for any school-related purpose and to avoid bringing in food that could pose a foreseeable risk to pupils with known allergies.
- **For school trips, sporting fixtures and residential activities**, allergy risks associated with food will be:
  - identified as part of the risk assessment process;
  - managed through appropriate planning and communication; and
  - supported by clear arrangements for access to medication and emergency response.
- **All arrangements relating to food brought into school will balance safety with inclusion**, ensuring that pupils with allergies are not excluded from activities unnecessarily and that reasonable adjustments are made in line with the school's duties

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under the Equality Act 2010.

Food Hygiene Expectations for Pupils

Good food hygiene practices play an important role in reducing the risk of allergen exposure and supporting the health and safety of all pupils, particularly those with food allergies.

The school expects that:

- **Pupils will wash their hands thoroughly before and after eating**, including before snacks and meals, to reduce the risk of cross-contamination.
- **Sharing, swapping or throwing food is not permitted** at any time, as this can present a significant risk to pupils with food allergies.
- **Water bottles, lunch boxes and packed lunches should be clearly labelled**, to support identification and reduce the risk of accidental allergen exposure.
- **Where pupils have access to kitchens or food preparation areas** (for example, in food technology rooms), the school will have clear procedures in place to:
    - minimise the risk of cross-contamination;
    - ensure appropriate cleaning and hygiene standards;
    - manage the safe storage of food, including separation of allergenic foods where necessary; and
    - provide appropriate supervision, in line with pupils' age and capability.

These expectations support a safe, inclusive and respectful environment and apply across the school day, including during clubs, activities and residential or boarding provision where relevant.

Individual children and young people

6. Identification

Allergy Register

The school will maintain an **up-to-date register of pupils with diagnosed allergies on their MIS system**.

The register will include:

- pupils with a **history of anaphylaxis**;
- pupils who have been **prescribed adrenaline auto-injectors**; and
- pupils with a **clinically diagnosed allergy where adrenaline auto-injectors have not been prescribed**.

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The allergy register will be used to support effective allergy management, risk assessment and communication with relevant staff, and will be reviewed and updated regularly to reflect changes in pupil medical information.

Information about allergies will be gathered from appropriate sources which may include asking a child or young person, their parents and their previous setting for relevant information, including known allergens and whether the child or young person may require medication (for example prescribed adrenaline). Copies of any Individual Healthcare Plan (from a previous school, college or setting) and/or Allergy Action Plan will be sought from previous schools.
The school will make every effort to ensure that arrangements are put in place within two weeks (once informed about an allergy), where it is appropriate for the school to do so.

Identification of allergies for staff and visitors

For members of staff, identification of allergies will form part of pre-employment checks. The school will ensure arrangements will be in place when they commence work. For visitors, information on allergies will be sought in advance of their visit wherever possible.

7. Individual Healthcare Plans (IHPs)

Pupils will have an Individual Healthcare Plan (IHP) if:

- they have an allergy which has a functional impact on them in their school;
- they are at risk of harm as a result of their allergy **and**
- they require arrangements which are additional to or different from those made generally.

The IHP will set out the additional and/or different arrangements that will be in place in the school, for supporting the pupil with their medical condition or allergy, including in emergency situations.

The IHP will be developed in partnership with parents/carers and relevant healthcare professionals and will be reviewed regularly and updated as required. An Individual Healthcare Plan (IHP) is not a clinical document. It is a description of how the school, college or setting will respond to the information and advice they have received concerning a child or young person's medical condition or allergy, including from the child or young person themselves, their parents and any healthcare professions involved in their care.

The IHP will include, as a minimum:

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- **Details of the pupil's known allergens** and any identified risk factors that may increase the likelihood or severity of an allergic reaction.
- **A summary of the pupil's allergy history**, including details of any previous allergic reactions or episodes of anaphylaxis, where known.
- **Clear information about prescribed medication**, including:
    - the type of medication (e.g. adrenaline auto-injectors, antihistamines, inhalers);
    - prescribed dose(s); and
    - any specific instructions for use.
- **Written parental/carer consent for the administration of medication**, including consent for the use of the school's spare adrenaline auto-injectors in the event of suspected anaphylaxis, where applicable.
- **A recent photograph of the pupil**, to support identification and safe management arrangements.
- **A copy of the pupil's Allergy Action Plan (where appropriate)**, setting out clear instructions on recognising symptoms and responding to an allergic reaction or anaphylaxis.
- **The impact of the allergy on health, education and wellbeing**
- **Arrangements for support**, including visits and trips procedures as well as emergency response.

IHPs will be kept as "live" documents, since they may need to be updated to reflect changes in the allergy, new advice from healthcare professionals and changes to care plans or medication. They will be reviewed annually but can be reviewed more frequently if the pupil's needs change.

The IHP will be shared with staff in line with school procedures.

8. Prescribed Adrenaline

Storage and Access to Adrenaline Auto-Injectors

The school will ensure that adrenaline auto-injectors (AAIs) are stored and managed safely, while remaining readily accessible in an emergency.

The following arrangements apply:

- **Pupils who have been prescribed adrenaline auto-injectors will have access to two in-date devices at all times**, in line with medical guidance and their Allergy Action Plan.
- **The school will clearly define its approach to the storage and carrying of adrenaline auto-injectors**, taking account of pupils' age, maturity and capability. This may include:

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- pupils carrying their own adrenaline auto-injectors; and/or
- centrally stored adrenaline auto-injectors held by the school.

As a general principle, pupils may transition from school-managed storage to carrying their own medication at an appropriate age (often around Year 4 or Year 5), subject to individual assessment and agreement with parents/carers.

- **Where adrenaline auto-injectors are stored centrally**, the school will ensure that:
  - the storage location(s) are clearly identified and known to staff;
  - devices are clearly labelled;
  - the pupil's Allergy Action Plan is stored with or readily accessible alongside the medication; and
  - access is available at all times during the school day.
- **Arrangements will also ensure that pupils have access to two adrenaline auto-injectors when travelling to and from school**, in accordance with agreed procedures and parental responsibilities.
- **Routine spot checks will be undertaken** to confirm that adrenaline auto-injectors are:
  - present in the correct locations; and
  - within their expiry dates.
- **Adrenaline auto-injectors must not be kept locked away**, as this could delay emergency treatment.
- **Adrenaline auto-injectors will be stored in accordance with manufacturer's guidance**, including:
  - being kept at moderate temperatures;
  - avoiding exposure to direct sunlight; and
  - not being stored near heat sources (e.g. radiators).
- **Used or expired adrenaline auto-injectors will be disposed of safely as sharps**, in line with local arrangements and waste disposal guidance.

Spare Adrenaline Auto-Injectors

In line with government guidance, the school holds **spare adrenaline auto-injectors (AAIs)** for use in an emergency where a pupil is experiencing suspected anaphylaxis and their own prescribed medication is not immediately available or is not suitable.

- The school currently holds 4 **spare adrenaline auto-injectors (x2 150mg (for children up to 5 years old) and x2 300mg (for anybody 6+)** .
- **The locations of spare adrenaline auto-injectors are clearly identified and signposted (near school office)**, and details of their location and dose are recorded.

Management and Oversight

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The **Designated Allergy Lead**, supported by the **school admin team**, is responsible for the management of spare adrenaline auto-injectors, including:

- **Determining the appropriate number of spare AAIs required**, taking account of:
  - the size and layout of the school site;
  - the number and age range of pupils; and
  - off-site activities.
    This may include holding spare AAIs in **clearly identified grab bags** for educational visits, sporting fixtures or other off-site activities.
- **Determining the appropriate dosage(s) to be held**, in accordance with **Resuscitation Council UK age-based guidance**.
- **Selecting the brand(s) of spare AAIs to be purchased**.
  Where reasonably practicable, the school will aim to purchase **a single brand** to reduce the risk of confusion during an emergency.
- **Arranging the purchase of spare AAIs**, which may be obtained at low cost from a local pharmacy, in line with current government guidance.
- **Replacement of AAIs if used**
- **Ensuring appropriate distribution of spare AAIs around the school site**, with:
  - clear signage;
  - secure but accessible storage; and
  - staff awareness of locations.

Access and Use

- Spare adrenaline auto-injectors will be **readily accessible at all times during the school day** and must not be locked away.
- Spare AAIs will be **stored and managed in accordance with manufacturer's guidance**, including temperature and storage conditions.
- **Records will be maintained** to support half termly monitoring of:
  - brand and dose;
  - expiry dates; and
  - location.

Adrenaline Auto-Injectors on Off-Site Activities

The school will ensure that appropriate arrangements are in place to manage allergies and anaphylaxis safely during educational visits, sporting fixtures and other off-site activities.

The following arrangements apply:

- **No pupil who has been prescribed adrenaline auto-injectors will attend an off-site activity without access to two of their own devices.**

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The visit or trip leader is responsible for checking that this requirement has been met prior to departure.

- **Adrenaline auto-injectors will be kept readily accessible at all times during off-site activities**, including during travel.
  Devices must not be:
  - stored in the hold of a coach or vehicle; or
  - left unattended in changing rooms, bags or other inaccessible locations.
- **Adrenaline auto-injectors will be protected from extreme temperatures**, in line with manufacturer's guidance, and will not be exposed to excessive heat, cold or direct sunlight.
- **All staff accompanying pupils on off-site activities will be made aware of pupils with allergies**, and will be appropriately trained to:
  - recognise the signs and symptoms of an allergic reaction, including anaphylaxis; and
  - respond in accordance with the pupil's Allergy Action Plan and school procedures.
- **As part of the visit risk assessment, consideration will be given to taking spare adrenaline auto-injectors** (where held by the school) on off-site activities. This decision, including arrangements for storage and access, will be documented within the risk assessment.

9. Responding

The school will respond promptly and effectively to any allergic reaction, with particular urgency where **anaphylaxis is suspected**, as this is a medical emergency.

If a pupil experiences an allergic reaction, staff must take the following actions:

- **Act immediately and follow the pupil's Allergy Action Plan**, where one is in place.
- **Activate the school's Emergency Response Plan** without delay.
- **If anaphylaxis is suspected, administer adrenaline immediately.** Adrenaline should not be delayed while awaiting further symptoms or confirmation.
- **Treat the pupil where they are**, unless they are in immediate danger. The pupil should be:
  - laid flat with their legs raised to improve blood flow; and
  - medication should be brought to them. *Do not make the pupil stand or walk.*
- **Use the pupil's own prescribed adrenaline auto-injector if it is immediately available.**
- **The pupil may self-administer their adrenaline auto-injector**, if they are able to do so. Alternatively, a member of staff may administer the device.

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While trained staff should administer adrenaline wherever possible, **in an emergency, any person is permitted to administer adrenaline to save life**.

- **If the pupil's own adrenaline auto-injector is unavailable, misfires or cannot be used, a spare adrenaline auto-injector must be used**, in accordance with school procedures.
- **If anaphylaxis is suspected in a pupil who does not have a known allergy, prescribed adrenaline or an Allergy Action Plan**:
    - lay the pupil flat with their legs raised;
    - call **999 immediately** and state that *anaphylaxis is suspected*;
    - inform the emergency call handler that the school holds **spare adrenaline auto-injectors**; and
    - follow the instructions given by the call handler. In exceptional circumstances, **a spare adrenaline auto-injector may be administered to any person for the purpose of saving life**, in line with MHRA advice.
- **If there is no improvement after 5 minutes**, administer a **second adrenaline auto-injector**, if available, and **call the emergency services again**, informing them that a second dose has been given.
- **Do not move the pupil** once adrenaline has been administered, even if symptoms appear to improve, **until assessed by a medical professional or paramedic**.
- **Any pupil who has received adrenaline for suspected anaphylaxis must be transferred to hospital**, even if they appear to have fully recovered. A member of school staff will accompany the pupil in the ambulance and remain with them until a parent or carer arrives.

School-wide policies

10. Spare adrenaline devices

The school will keep a stock of 'spare' adrenaline devices of the correct dosage for pupils, for use in emergency situations. Any adrenaline devices held by a school in this way will be considered a "spare" device and not a replacement for a child or young person's own adrenaline device.

Children and young people at risk of anaphylaxis should have their prescribed adrenaline devices with them at school for use in an emergency and should have access to both of their two prescribed adrenaline devices at all times. The school will ensure that no child or young person is more than five minutes from adrenaline devices. Adrenaline devices will always be stocked and stored in pairs.

When storing "spare" adrenaline devices the school will ensure:

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- "Spare" adrenaline devices are readily accessible and not locked away;
- In the event of an anaphylaxis, adrenaline will be administered as soon as possible. In practice, this should be no more than five minutes
- "Spare" adrenaline devices will be stored in pairs, so that if a second one is necessary it is on hand rather than needing to be obtained from elsewhere on site;
- "Spare" adrenaline devices will be clearly labelled, to avoid any confusion with adrenaline devices prescribed to a named person.
- The DAL or designated member of staff will ensure that appropriate half termly checks are in place to confirm that spare devices are in date and replaced when required.

11. Visits and trips

The schools will conduct a risk assessment for any child or young person at risk of anaphylaxis taking part in a trip off the premises. Children and young people at risk of anaphylaxis should have their own adrenaline device with them, and there will be staff trained to administer adrenaline in an emergency.

The school will ensure that appropriate arrangements are in place to manage allergies and anaphylaxis safely during educational visits, sporting fixtures and off-site activities.

To support this, the school will ensure that:

- **The member of staff leading the visit or activity holds an up-to-date list of pupils with allergies**, together with details of their prescribed medication and emergency arrangements.
- **All staff accompanying the visit** will be made aware of pupils with allergies and the control measures in place.
- **Allergy risks are identified and addressed within the visit risk assessment**, including consideration of:
    - activities undertaken;
    - food provision; and
    - the environment or venue being visited.
- **Catering arrangements for visits are planned in advance**, with appropriate controls in place to ensure pupils with allergies are provided with safe meals or alternatives.
- **Parents/carers, and pupils where appropriate, may be consulted during the planning process**, particularly where:
    - the visit involves food provision;
    - the pupil's allergy presents a higher level of risk; or

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- the visit includes an overnight stay or residential element.

- **Staff accompanying the visit will be trained to recognise and respond to allergic reactions and anaphylaxis**, in line with school procedures. Where appropriate and proportionate, older pupils may also be supported to understand how to raise the alarm and seek help in an emergency.
- **Where packed lunches or catered meals are provided**, allergen information will be clearly labelled.
- **Where pupils attend events hosted by another school or organisation** details of dietary requirements and allergies will be shared in advance to support the provision of a safe meal.
- **Arrangements for access to medication and emergency response** will be clearly planned and communicated, including ensuring that prescribed medication is readily accessible at all times.
- **[Spare AAI are also to be taken on school trips]** for any child who has an anaphylaxis reaction.

12. Serious incidents and "near misses"

We log all allergic reactions and near-misses, investigate causes, share learning, and update risk controls, training and plans as needed. Where applicable, incidents are reported to external bodies in line with statutory requirements and may inform reviews to the policy and/or to the Individual Healthcare Plan.

In some cases, the impact of exposure to an allergen while in an education setting may not be recognised the child or young person is back at home. It is therefore important that the child or young person, their parents or others (for example healthcare professionals) can report that there has been an incident.

13. Information sharing

The school will need to hold, use and share information on allergies in order to ensure the pupil receives the support they need to stay safe and be included in education. A child or young person's health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Therefore, this data will be held, used and shared when it is necessary but this will always be done in a controlled and respectful way.

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14. Awareness of the allergy safety policy

The allergy safety policy will be published on the school website. All staff will be aware of, and understand, the policy, as part of annual allergy awareness training.

The school will raise awareness of allergy safety among children in assemblies and also though the Healthy Me units of PSHE from Year 1 to Year 6.

Where pupils are prescribed adrenaline devices, it may be appropriate for their friends to be made aware of how to seek help in an emergency. Any wider awareness or training will be considered carefully and discussed with the pupils and their parents. Such wider awareness or training will not replace staff emergency response arrangements.

The full DfE Guidance to Allergy Safety in Schools can be found here.

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

Allergy:

Note what allergy the child or young person has.

Note any known allergens.

Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.

How the allergy is managed:

Note any care or action plans or prescribed medication issued by healthcare professionals.

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 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 learning.

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:

Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.

Outline measures to reduce the risk of contact with known allergens.

Give details of the specific support or adaptations to manage food allergy at meal and snack times.

Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.

Visits and trips:

Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.
Note any requirement for a risk assessment and prompts for specific issues which should be considered.

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Emergency response: *Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.* *Otherwise summarise the signs or symptoms which would indicate an emergency.* *Set out what to do in an emergency, including whom to contact.* *If relevant, note where "spare" adrenaline devices are located.*	
Last discussed with parents:	**Date**
Issued by:	**Date**:
Next planned review:	**Date**:

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