ALLERGY SAFETY POLICY

Chillingham Road Primary School

Author	Creation Date	Version	Status	Review
E Allen	23.09.26	1	Ratified by governors Sep 26	

1. Policy Statement

Chillingham Road Primary School is committed to providing a safe, inclusive and supportive environment for all children with allergies. The school recognises that allergies can range from mild reactions to life-threatening anaphylaxis. This policy establishes whole-school arrangements for identification, prevention, management and emergency response. The school will work closely with parents/carers, healthcare professionals and external agencies to ensure that children with allergies are protected and fully included in all aspects of school life.

2. Aims of the Policy

The aims of this policy are to protect the health and wellbeing of children with allergies; ensure staff understand their responsibilities; establish robust systems for communication, training and record keeping; provide effective emergency procedures; promote inclusion and equality and ensure compliance with statutory guidance and best practice.

3. Scope

This policy applies to all children, employees, agency staff, volunteers, governors, contractors and visitors. It applies during lessons, clubs, wraparound care, visits, residentials, sporting activities and any other activity organised by or on behalf of the school.

4. Roles and Responsibilities

The Governing Body will monitor implementation of this policy. The Headteacher will ensure sufficient resources, training and oversight. The Allergy Lead will maintain records, coordinate reviews and monitor incidents. Teachers, support staff, midday supervisors and club staff will follow healthcare plans and emergency procedures.
Parents/carers must provide accurate information, medication and updates regarding their child's condition.

The school will ensure that relevant contractors, volunteers, visitors and external providers are made aware of any arrangements necessary to safeguard children with allergies whilst maintaining appropriate confidentiality. Where contractors or external providers are delivering services involving children, the school will ensure that relevant allergy information and emergency arrangements are communicated appropriately.

The Governing Body is responsible for ensuring that appropriate allergy management arrangements are in place and for receiving an annual Allergy Safety Report.

Allergy Lead: Erika Allen, Headteacher

5. Identification and Assessment

Parents/carers must notify the school of allergies at admission and whenever information changes. Medical evidence and healthcare plans will be obtained where appropriate. Risk assessments will be completed for children with significant allergies and reviewed regularly.

6. Allergy Register

The school will maintain a secure allergy register containing allergens, symptoms, medication, healthcare plans, emergency contacts, review dates and staff notifications. The register will be reviewed at least annually and whenever circumstances change.

All allergy-related information will be stored and processed in accordance with UK data protection legislation. Information will only be shared with staff and others who require it in order to ensure the safety and wellbeing of children.

7. Communication

Effective communication is essential. Relevant information will be shared with staff while respecting confidentiality. Supply staff will be informed of relevant needs. Parents/carers will be informed about arrangements affecting their child. Concerns and incidents will be communicated promptly.

8. Individual Healthcare Plans

Children with significant allergies will have an Individual Healthcare Plan. Plans will include diagnosis, symptoms, allergens, medication, administration instructions, emergency procedures, educational visit arrangements and contact details. Plans will be reviewed annually or sooner if required.

Where necessary, plans will be developed in consultation with parents/carers and relevant healthcare professionals.

9. Risk Reduction Measures

Although the school cannot guarantee an allergen-free environment, reasonable steps will be taken to reduce risk. These include discouraging food sharing, promoting handwashing, cleaning eating areas, risk assessing curriculum activities and providing staff guidance regarding allergens.

10. Catering and Food Management

The school will work with catering providers to manage allergen information. The school and catering provider will maintain accurate allergen information for all food served. Catering staff will be informed of pupils with food allergies and procedures will be in place to prevent cross-contamination where reasonably practicable.

Food-based activities, celebrations and fundraising events will be planned with due regard to known allergies. Alternative arrangements will be considered where necessary.

11. Classroom Practice

Teachers will consider allergy risks when planning lessons. Activities involving food, animals, plants or substances that may trigger reactions will be assessed in advance. Children with allergies will not be excluded unnecessarily and reasonable adjustments will be made.

12. Educational Visits and Residential Visits

All visits will include consideration of allergy risks. Visit leaders will complete a visit risk assessment, highlighting the needs of any children with allergies; review healthcare plans, carry medication and identify responsible adults. Emergency arrangements and access to medical services will be considered during planning and included on the visit risk assessment.

An allergy checklist should be completed before departure to ensure that medication, healthcare plans and emergency contact details are available and accessible throughout the visit.

13. Before and After School Provision

Breakfast clubs and after-school clubs and will operate in accordance with this policy. Staff leading activities will have access to relevant healthcare information and emergency procedures.

14. Medication Management

Medication must be supplied in its original packaging, clearly labelled with a pharmacist label and in date. Storage arrangements will ensure medication is secure but readily accessible in an emergency. Records will be maintained when medication is administered.

15. Adrenaline Auto Injectors

The school will maintain spare adrenaline auto-injectors (AAIs) in accordance with current legislation and statutory guidance. Storage locations will be clearly identified. Expiry dates will be checked regularly and replacement arrangements will be monitored.

Spare adrenaline auto injectors may be used in an emergency for any child believed to be experiencing anaphylaxis, in accordance with staff training and established procedures. Spare AAIs will be located so that they can be accessed immediately in an emergency. Staff will be informed of storage locations and these locations will be reviewed as part of routine safety audits

16. Training

All staff will receive appropriate allergy awareness training. Training will include recognition of symptoms, emergency procedures, use of adrenaline auto injectors, record keeping and incident reporting. New staff will receive induction training and refresher training will be provided.

17. Emergency Response Procedures

Staff must act immediately if anaphylaxis is suspected. The priority actions are to administer an adrenaline auto injector immediately if anaphylaxis is suspected and in accordance with the child's healthcare plan and staff training, call 999 and state that anaphylaxis is suspected, inform parents/carers and continue monitoring the child until emergency services arrive.

Where symptoms of anaphylaxis are present, administration of an adrenaline auto injector should not be delayed whilst waiting for confirmation.

18. Reporting and Investigation

All allergy incidents and near misses will be recorded. Significant incidents will be reviewed by school leaders to identify lessons learned and improve procedures. Outcomes may be reported to governors where appropriate.

The school will comply with any reporting requirements under health and safety legislation where applicable. Serious incidents will be reviewed to determine whether notification to external agencies is required.

19. Inclusion and Wellbeing

Children with allergies should be able to participate fully in school life. The school will support attendance at clubs, visits and special events through reasonable adjustments and careful planning. Bullying relating to medical needs will not be tolerated.

The school recognises that some allergy conditions may constitute a disability under the Equality Act 2010 and will make reasonable adjustments, where appropriate, to ensure that children can access education and school activities on an equal basis with their peers.

20. Transition Arrangements

Where children move between classes, phases or educational settings, relevant allergy information and healthcare arrangements will be shared with receiving staff and organisations, in accordance with data protection requirements, to support a safe and effective transition.

21. Allergy Awareness Education

Age-appropriate allergy awareness education will be provided to children to promote understanding, inclusion and safe behaviours such as avoiding food sharing and seeking adult help if a peer appears unwell.

22. Monitoring

The policy will be reviewed annually. Monitoring will include training records, healthcare plans, medication checks, incident logs and feedback from parents/carers and staff.

The policy will be reviewed annually by the Headteacher, Allergy Lead and Governing Body. Monitoring will include training records, healthcare plans, medication checks, incident logs, near miss reports and feedback from parents/carers and staff.

The Governing Body will receive an annual Allergy Safety Report summarising:

- staff training compliance;
- healthcare plan compliance;
- medication and AAI audits;
- allergy incidents and near misses;
- lessons learned from incidents;
- any required policy updates or risk reduction measures.

This policy will be published on the school website and made available to parents, carers, staff and governors.

Appendix 1: Signs of Mild and Severe Allergic Reactions

Mild to Moderate Allergic Reaction

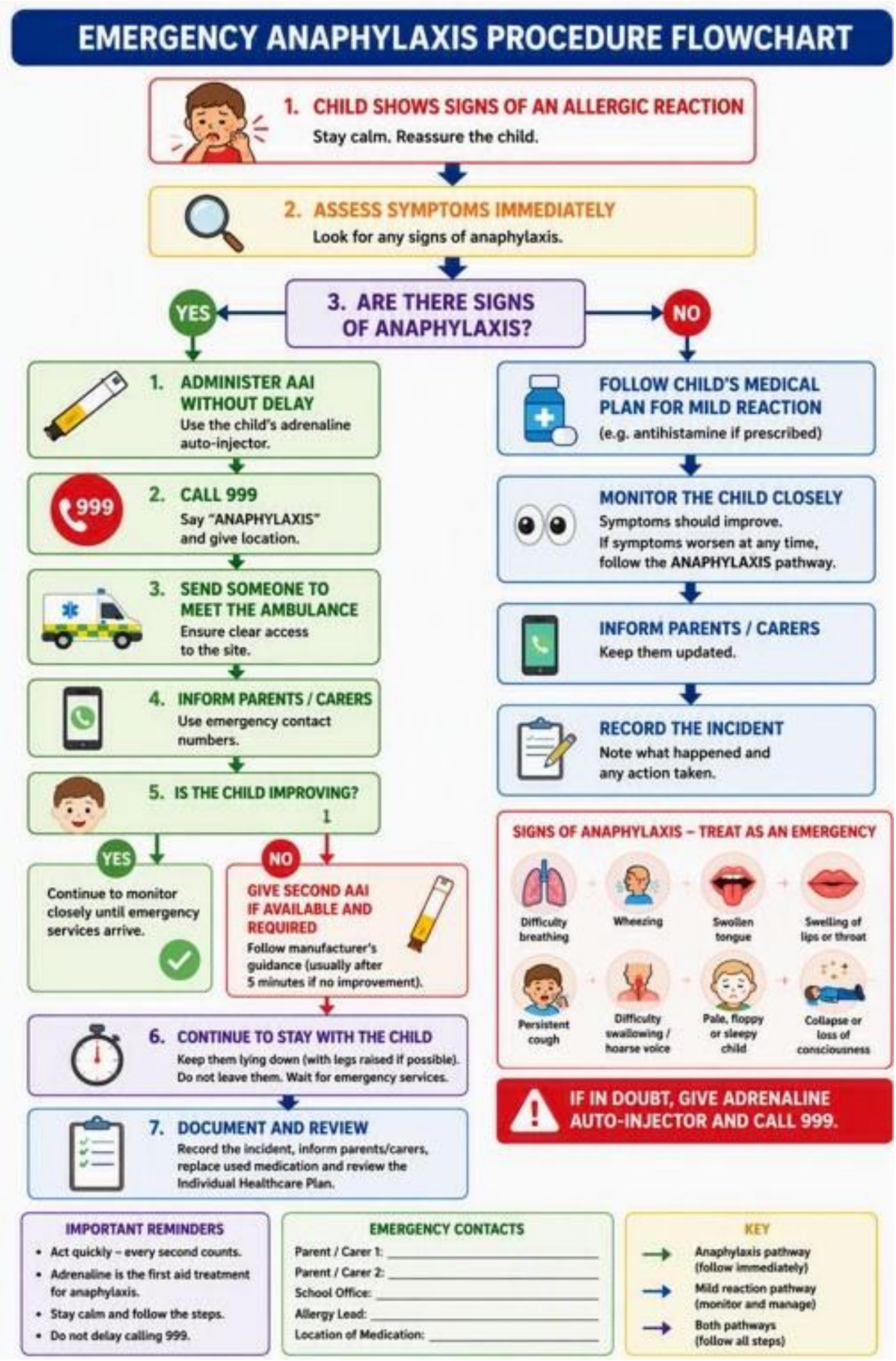
- Itchy mouth
- Tingling lips
- Localised swelling of lips, face or eyes
- Hives or itchy rash
- Abdominal pain
- Nausea or vomiting
- Sneezing or runny nose

Severe Allergic Reaction (Anaphylaxis)

- Difficulty breathing
- Noisy breathing or wheeze
- Persistent coughing
- Swollen tongue
- Difficulty swallowing
- Hoarse voice
- Feeling faint or floppy
- Collapse or loss of consciousness

Based on symptoms identified in the DfE guidance.

Appendix 2: Emergency Response Flowchart



Appendix 3: Individual Healthcare Plan Checklist

What should the plan include?

The DfE does not prescribe a specific format for healthcare plans, but it does provide guidance on what to include.

The level of detail in the plan will depend on the complexity of the pupil's condition and support needed.

Consider including the following details:

- The medical condition (and its triggers, signs, symptoms and treatments)
- The pupil's needs resulting from the condition, such as medication and other treatments, time, facilities, equipment, testing, access to food and drink if it's used to manage the condition, dietary requirements, and environmental issues
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed (e.g. if the child is self-managing their medication)
- Who will provide the support and who in the school needs to be aware of the child's condition
- What to do in an emergency

Who should be involved in creating the plan?

A member of school staff or a healthcare professional should write the plan, in consultation with the parents and the pupil. Although healthcare professionals may be involved in writing the plan, the responsibility for making the plan rests with your school.

Headteachers are responsible for:

- Overseeing the development of the plan
- Making sure all staff who need to know about the plan are aware of it
- Making sure that staff are insured to support pupils with their medical needs
- Making sure there are enough trained staff available to implement the plan, including in contingency and emergency situations

Parents are responsible for:

- Telling the school what exactly their child's medical needs are
- Updating the school if things change
- Carrying out actions they have agreed to do (e.g. providing medicines and equipment or ensuring they or another nominated adult are contactable at all times)

Pupils should:

- Be involved in the discussion and contribute to the plan
- Explain how their condition affects them
- Follow the process set out in the plan

Healthcare professionals, like the school nurse or the pupil's paediatrician, can provide advice on how a pupil's medical needs can be met.

Appendix 4: Individual Healthcare Plan for allergy

Chillingham Road Primary 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.*	
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/carers:	**Date**
Issued by:	**Date**:
Next planned review:	**Date**:

Appendix 5: Educational Visit Allergy Checklist

Educational Visit Allergy Checklist

This checklist can be used by visit leaders before any educational visit involving a child with a diagnosed allergy.

Child Details

Child's name:		Class:	
Date of visit:		Destination:	
Visit leader:			

Allergy Information

Child has a current Individual Healthcare Plan (IHP)		IHP has been reviewed before the visit	
Staff accompanying the visit have read the IHP		Child's allergies are clearly identified	
Allergens:			

Medication

Required medication is available		Medication is in date	
Medication is clearly labelled		At least two AAIs available (if prescribed)	
Medication will remain accessible throughout the visit		Named member of staff responsible for carrying medication	

Staff Knowledge and Training

At least one member of staff is trained in recognising allergic reactions		At least one member of staff is trained to administer an adrenaline auto-injector	
Accompanying adults know emergency procedures		Mobile phone available for emergencies	

Venue and Activity Risk Assessment

Allergens within activities have been identified		Food arrangements have been checked	
Catering provider informed of allergy requirements		Packed lunch arrangements checked	
Environmental allergens considered (e.g. insects, animals, plants)		High-risk activities identified and control measures in place	

Transport

Medication accessible during transport		Emergency contact details available	
Staff aware of child's seating arrangements if required			

Emergency Arrangements

Emergency contacts available		Nearest hospital identified	
Emergency procedures discussed with accompanying staff		Child knows who to approach if feeling unwell	

Parent/Carer Communication

Parents informed of visit arrangements		Parents confirmed medication supplied	
Parents provided emergency contact numbers			
Additional information from parents:			

Final Approval

I confirm that appropriate arrangements have been made to support this child safely during the educational visit.

Visit Leader: _____

Signature: _____

Date: _____

Educational visits involving children with allergies should be planned using the child's IHP and the school's allergy procedures so that medication, trained staff and emergency arrangements are in place before departure.

Appendix 6: Allergy Near Miss Record

Allergy Near Miss Record

This form can be used to record incidents where a child was exposed, or almost exposed, to an allergen but no allergic reaction occurred, or where a reaction was avoided through timely intervention. Recording near misses helps schools identify risks and improve allergy safety arrangements.

Incident Details

Date:		**Time:**	
Location:		**Reported by:**	
Child's Name:		**Class:**	

Type of Near Miss (tick all that apply)

Allergen brought into classroom		Food sharing almost occurred	
Incorrect food provided		Incorrect labelling of food	
Medication not immediately available		Educational visit concern	
Catering error		Staff unaware of child's allergy	
Child exposed to allergen but did not consume/contact it		Other	

Description of Incident

Provide a factual account of what happened.

Immediate Action Taken (tick all that apply)

Hazard removed		Food withdrawn	
Child moved to safe area		Parents informed	
Staff informed		Additional monitoring undertaken	
Other			
Details:			

Was the Child Exposed to the Allergen?

☐ No ☐ Possibly ☐ Yes If yes, provide details:

Did a Reaction Occur?

☐ No ☐ Mild symptoms ☐ Moderate symptoms ☐ Severe symptoms

If symptoms occurred, complete the school's medical incident reporting procedures.

Contributing Factors

Lack of awareness		Communication failure	
Inadequate supervision		Catering error	
Labelling issue		Educational visit arrangements	
Policy not followed		Training need identified	
Other			
Details:			

Follow-Up Actions Required

Action	Responsible Person	Completion Date

Review by Allergy Safety Lead

What lessons have been learned?

What changes are required to prevent recurrence?

Sign Off

Completed by: _____ **Signature:** _____

Date: _____ **Reviewed by:** _____

Signature: _____ **Date:** _____

Near Miss Log Summary

Date	Child	Brief Description	Action Taken	Closed

Good practice: Review allergy near misses termly alongside accident and incident records to identify patterns, training needs and improvements to allergy control measures.

Appendix 9: Staff Training Record – Allergy Awareness and Anaphylaxis

Staff Training Record - Allergy Awareness and Anaphylaxis

Training Details

Training Title:	Allergy Awareness and Anaphylaxis	**Training Provider:**	
Date of Training:		**Trainer:**	
Location:		**Expiry/Refresher Date:**	

Training Content Covered

Topic	Covered
Understanding allergies	☐
Allergy legislation and school responsibilities	☐
Identifying common allergens	☐
Recognising signs and symptoms of allergic reactions	☐
Recognising anaphylaxis	☐
Risk reduction and prevention strategies	☐
Reading and following Individual Healthcare Plans	☐
Emergency procedures	☐
Use of antihistamines	☐
Use of adrenaline auto-injectors (AAIs)	☐
Practical AAI demonstration	☐
Educational visits and allergy management	☐

Staff Attendance Record

Name	Role	Signature	Date