Greatworth Primary School

Allergy Safety Policy (including appendices 1,2,3 IHP)

Statutory Policy	Yes/No	
Published on Website	Yes	
Policy Ownership	Head Teacher	Yes/No
	Finance & Premises Committee	Yes/No
	Quality & Standards Committee	Yes/No
	Full Governing Board	Yes/No
Implementation Date	September 2026	
Review Period	Annually	
Planned Review Date	September 2027	

1. Purpose

Greatworth Primary School is committed to providing a safe and inclusive environment for all members of the school community. This policy outlines the arrangements in place to minimise risks associated with allergies and to ensure appropriate support is available for children, young people, staff and visitors with allergies.

2. Leadership and Responsibilities

The Headteacher has overall responsibility for ensuring allergy safety within the school. Day-to-day responsibility has been delegated to Rebecca Rance (Deputy DSL) and Linnea Ploen, who will oversee and drive the implementation of this policy. This policy will be reviewed annually and may be reviewed earlier following an incident, near miss, change in legislation, or where improvements are identified.
The policy will be:

- Shared with staff, governors and parents/carers.
- Published on the school website.
- Available in hard copy upon request.

3. Staff Training

The following personnel will receive allergy awareness training:

- Permanent staff
- Temporary staff
- Supply teachers
- Peripatetic staff
- Agency workers
- Regular volunteers
- Catering staff
- Staff supporting breakfast and after-school clubs

Contractors with no pupil-facing role, such as builders, electricians or maintenance personnel, are not required to undertake allergy awareness training.

3.1 Training Content

Training forms part of induction arrangements and annual refresher training. Staff training will ensure that all staff:

- Understand allergy and the risks it poses.
- Understand how allergic reactions occur and how they are managed.
- Understand that allergy can include food allergy, asthma, eczema, hay fever and other conditions which may co-exist.

- Understand the difference between food allergy, coeliac disease and food intolerance.
- Know where to find information regarding allergy triggers.
- Can identify symptoms of allergic reactions.
- Can recognise anaphylaxis.
- Know how to respond appropriately in an emergency.
- Know how to locate and administer emergency medication.
- Understand how allergies may affect a child's wellbeing.
- Understand the school's Allergy Safety Policy.
- Know how to use Allergy Action Plans and Asthma Action Plans.
- Understand their individual responsibilities in reducing allergen exposure risks.
- Know how to report allergic reactions, anaphylaxis incidents and near misses.

Training provided under this policy relates to allergy awareness and emergency response and does not replace any clinical governance arrangements required for individual healthcare support.

4. Wellbeing

The school recognises that allergies can significantly affect wellbeing and may cause anxiety for children and young people.

To support wellbeing, the school will:

- Promote an inclusive environment.
- Encourage children to speak to a trusted adult if they are worried or feeling unwell.
- Monitor wellbeing where allergy-related concerns are identified.
- Address and prevent bullying associated with allergies.
- Educate staff, children and parents/carers about allergy awareness.

5. Minimising Risk

The school will take reasonable steps to minimise the risk of individuals coming into contact with known allergens.

This includes:

5.1 Food Provided by School

Measures to manage risks associated with food prepared or provided by the school.

5.2 Food Brought into School

Measures to manage risks associated with food brought into school by pupils, staff or visitors. **Greatworth Primary School is a nut-free school.**

5.3 Non-Food Allergens

Where children have known airborne or contact allergies, reasonable measures will be implemented to reduce exposure to allergens.

5.4 Curriculum Activities
Staff planning activities must consider the potential risk of allergen exposure, including:

- Cooking activities
- Science lessons
- Art and craft activities
- Music activities
- Animal-related activities

5.5 Educational Visits
Specific risk assessments will be completed for pupils with allergies participating in off-site visits and residential trips.

6. Food Allergy Management
The school will manage food allergy risks and provide clear information regarding allergens in food provided by the school.
Detailed arrangements are set out within the school's allergen management and catering procedures.

7. Identification of Individuals with Allergies
The school will maintain arrangements for identifying individuals with allergies, including:

- Pupils
- Staff
- Volunteers
- Visitors where relevant

Information maintained may include:

- Known allergens
- Prescribed medication
- Adrenaline Auto-Injector (AAI) requirements
- Allergy Action Plans
- Asthma Action Plans

Information regarding allergies will be gathered from parents/carers, healthcare professionals and previous educational settings where appropriate.

8. Individual Healthcare Plans (IHPs)
A child will have an Individual Healthcare Plan where:

- Their allergy has a significant impact on school life.
- They are at risk of harm as a result of their allergy.
- Additional or different arrangements are required beyond those generally available to all pupils.

The IHP will detail:

- Support arrangements.
- Risk reduction measures.

- Emergency procedures.
- Medication requirements.
- Reasonable adjustments where required.

Where an Allergy Action Plan or Asthma Action Plan exists, it will be attached to or referenced within the IHP.
IHPs will be reviewed whenever updated medical information becomes available.

9. Prescribed Adrenaline Devices
The school will ensure that:

- Pupils prescribed adrenaline devices have rapid access to them at all times.
- Adrenaline devices are accessible during lessons, lunchtime, breaktimes, sports activities and educational visits.
- Staff know where devices are located and understand emergency procedures.
- Systems are in place to monitor expiry dates.
- Records are maintained of pupils prescribed adrenaline devices.
- Allergy-related incidents and near misses are recorded on CPOMS.

Several members of staff hold paediatric first aid qualifications, and annual training includes guidance on administering adrenaline.

10. Spare Adrenaline Devices
The school maintains spare adrenaline devices in accordance with national guidance.

10.1 Storage
Spare adrenaline devices will be:

- stored in the main office beside the defibrillator.
- clearly labelled as an "Emergency Anaphylaxis Kit".
- readily accessible and not locked away.
- stored in pairs.
- replaced before expiry.

10.2 Monitoring
Spare adrenaline devices and emergency inhalers will be checked during half-termly first aid monitoring checks.

10.3 Emergency Response
In the event of suspected anaphylaxis:

- Adrenaline should be administered immediately.
- Every effort will be made to ensure that no child is more than five minutes from access to adrenaline.
- Emergency services will be contacted without delay.
- Parents/carers will be informed as soon as possible.

11. Educational Visits and Trips
A risk assessment will be completed for any pupil at risk of anaphylaxis prior to an educational visit.
The school will ensure:

- Pupils with allergies are able to participate safely in visits and trips.
- Appropriate staff are briefed.
- Parents/carers are involved in planning where necessary.
- Access to emergency medication is maintained at all times.
- Trained staff accompany pupils where required.

Children at risk of anaphylaxis should have access to their prescribed adrenaline device throughout the visit.
All allergy-related incidents and near misses will be recorded on CPOMS.

12. Information Sharing and Data Protection
The school will share allergy-related information only where necessary to protect the health and safety of the individual.
Information may be displayed:

- Near emergency medication stations.
- Within Individual Healthcare Plans.
- Within risk assessments where relevant.

A child's health information is special category personal data under UK GDPR and will be managed lawfully, sensitively and proportionately.

13. Recording and Reporting Incidents
The school will:

- Respond promptly to allergy-related incidents.
- Record incidents and near misses on CPOMS.
- Review incidents to identify lessons learned.
- Update procedures where improvements are identified.

Parents/carers and relevant professionals will be informed where appropriate.

14. Promoting Allergy Awareness
All staff will be made aware of this policy through annual training.
The school will promote allergy awareness through:

- Assemblies
- PSHE education
- Newsletters
- Staff training

Where appropriate, friends and peers of children prescribed adrenaline devices may receive age-appropriate awareness information about seeking help during an emergency.
Any wider awareness activities will be discussed with the child and their parents/carers and will not replace staff emergency response arrangements.

Equality Statement
Greatworth Primary School is committed to ensuring that all children and young people with allergies are able to participate fully in school life and will

make reasonable adjustments, where appropriate, in accordance with the Equality Act 2010.

Monitoring and Review

This policy will be reviewed annually or sooner in response to:

- Significant incidents or near misses
- Changes in legislation or guidance
- Changes to school procedures
- Outcomes from monitoring activities

Appendix 1

Symptoms of anaphylaxis

Anaphylaxis usually develops suddenly and gets worse very quickly. The

symptoms include:

- feeling lightheaded or faint
- breathing difficulties – such as fast, shallow breathing
- wheezing
- a fast heartbeat
- clammy skin
- confusion and anxiety
- collapsing or losing consciousness

There may also be other allergy symptoms, including an itchy, raised rash (hives), feeling or being sick, swelling (angioedema), or stomach pain.

www.nhs.co.uk

Frequently Asked Questions from Allergy UK Schools

Q. Do we need a nut free school, or what is the best approach to deal with this issue?

A. A complete nut free school is an artificial environment that would not be the same as the 'real world'. We believe that a 'whole school awareness of Allergy' is a much better approach, as it will make teachers, pupils and all other staff aware of what allergy is, the importance of avoiding the child/young person's triggers, the signs & symptoms, how to deal with allergic reactions and facilitate 'duty of care' procedures to minimise risk.

Q. How can a child's school ensure their safety from a severe allergic reaction?

A. Avoidance of the child's allergic trigger is key, but there are rarely any absolute certainties in life so by having allergy awareness, clear policy and procedures that recognise the allergic child and a clear management pathway of what to do if that

child has an allergic reaction, risk can be minimised and situations can be promptly dealt with in the most appropriate way.

Q. We have to isolate children at lunchtime, due to concerns they will have an allergic reaction to food in the canteen. Is this the best approach?

A. In the world outside school people with allergy are not isolated. Education in safe management should enable pupils with allergy to be integrated not isolated.

Appendix 2 (Individual Healthcare Plan for Allergy)

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:	**Date**
Issued by:	**Date**:
Next planned review:	**Date**:

NAME – Individual Healthcare Plan for allergy **Annex: Medication needed while in school / college / setting**	
Non-prescription medication: *Record any non-prescription medication (e.g. oral antihistamines) which the child or young person may require to manage their allergy in the education setting* *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Parental consent:	**Date**:
Prescription medication: *Record any prescription medication for allergy prescribed by a healthcare professional (e.g. adrenaline).* *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access.* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Prescribed by:	**Date**:
Parental consent:	**Date**:
Use of "spare" adrenaline devices: *Note whether parental consent has been given to administer adrenaline (e.g. using "spare" adrenaline devices) in an emergency.*	
Parental consent:	**Date**:
Use of "spare" salbutamol inhaler: *If relevant (i.e. the child or young person is prescribed an asthma reliever inhaler), note whether consent has been given to use a "spare" salbutamol reliever inhaler.*	
Parental consent:	**Date**:

NAME – Individual Healthcare Plan for allergy Annex: Care or Action Plans issued by healthcare professionals	
Allergy / Asthma Action Plan: *Attach any Action Plan to the IHP for use in an emergency.* *Note which healthcare professional issued the plan, their role and the date issued.*	
Issued by:	**Date**:
Care Plan: *Note where any relevant care plan can be found.* *Note what staff are responsible for delivering / supporting delivery of the care plan.* *Note which healthcare professional issued the plan, their role and the date issued.*	
Date:	**Date**:

Appendix 2: Letter to Pharmacist requesting AAI and asthma inhalers.

Subject: Request for Emergency Adrenaline Auto-Injectors and Salbutamol Inhalers

Dear Sir/Madam

I am writing on behalf of **Greatworth School** to request support in obtaining emergency medication for use within our school as part of our health, safety, and allergen management procedures.
As part of our commitment to safeguarding pupils with severe allergies and asthma, and in accordance with our school's Allergy and Asthma Policy, we would like to request:

- **Two (2) emergency adrenaline auto-injectors (AAIs)** for use in the event of an anaphylactic reaction.
- **Two (2) emergency salbutamol inhalers** to be held as spare reliever inhalers for pupils with asthma.

These medications will be securely stored on school premises and administered only by appropriately trained members of staff in line with statutory guidance and the school's medical needs procedures.

We would be grateful if you could advise us on the process and documentation required to obtain these emergency medicines for school use. Should you require any further information, please do not hesitate to contact me.

Thank you for your assistance in helping us maintain a safe environment for all pupils.

Yours sincerely,

Lesley Lutas-Brown
Headteacher
Greatworth Primary School