Elson Junior School

ALLERGY SAFETY POLICY 2026-2027

ADAPTABILITY ASPIRATION COMPASSION CREATIVITY INTEGRITY

Elson Junior School

ALLERGY SAFETY POLICY

Policy revision date	September 2026
Review frequency	Annually
Policy written by*	Rachel Blackwell (Allergy Safety Lead)
***Please indicate if it is model policy (and if so if it has been localised) and/or if the author has used AI to assist**	DfE Model Policy localised
Governing Body/HT approval date	September 2026
Date policy due for next review:	September 2027

Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction, both on and offsite.
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion.
- Promote and maintain allergy awareness among the school community.

Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

Roles and responsibilities

The governing body

The governing body is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk assessments, pupil records and Individual Helath Plans (IHPs) and actively managed.
- The school has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis

The governing body delegates the day-to-day implementation of this policy to the allergy safety lead.

Allergy safety lead

The nominated allergy safety lead is Rachel Blackwell . They are responsible for:

- Implementing this allergy safety policy.
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published.
- Promoting and maintaining allergy awareness across our school community.

- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD).
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff.
    - All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP).
    - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional, where relevant all staff receive regular allergy awareness training.
    - All staff are aware of the school's policy and procedures regarding allergies.
    - Relevant staff are aware of what activities need an allergy risk assessment.
    - Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff what lessons there are to learn and any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP.
- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

Headteacher

The headteacher is responsible for:

The headteacher has overall responsibility for the implementation of this policy and safeguarding pupils.

Other responsible staff

Kate Holt and Rachel Blackwell are responsible for:

- Checking spare AAIs are present and in date on a monthly basis.
- Making sure that replacement AAIs are obtained when expiry dates approach.
- IHPs are up to date.
- Staff training is arranged and delivered.

Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils.
- Maintaining awareness of our allergy safety policy and procedures.
- Being able to recognise the signs of severe allergic reactions and anaphylaxis.

- Being aware of specific pupils with allergies in their care.
- Reducing the risk to pupils with known allergies coming into contact with known allergens.
- Ensuring the wellbeing and inclusion of pupils with allergies.
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead.
- Ensuring emergency medicines are available at all times of the school day (including working outside or different rooms).

Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety policy.
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis.
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner.
- Following the school's guidance on food or items brought in to the school.
- Updating the school on any changes to their child's condition.

Pupils with allergies

If age-appropriate, pupils are responsible for:

- Being aware of their allergens and the risks they pose.
- Understanding how and when to use their AAI and any other medicine used to manage their condition.

Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers.
- Support their peers and staff in the case of an emergency.

Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould.

- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals.
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis.
- Asthma which may be triggered by airborne allergens.
- Allergy to insect stings and medicines.

Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks.
- Send a reminder to parents/carers at the start of each year asking them to update their child's medical information as necessary.

We ask that parents/carers proactively inform us via an email to adminoffice@elson-jun.hants.sch.uk if their child's medical needs change during the school year.

Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment.
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally.

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the pupil while they are at school, or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The allergy lead is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required.
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required.

IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

Register of pupils with known allergies

The school maintains a register of pupils who have a known allergy. The register includes:

- Known allergens and identified risk factors for anaphylaxis.
- Whether a pupil has been prescribed AAIs (and if so, what type and dose).
- Where a pupil has been prescribed an AAIs, whether parental consent has been given to administer emergency medication.
- A photograph of each pupil to allow a visual check to be made (this will require parental consent).

The register is kept in a location easily accessible to staff and can be checked quickly by any member of staff as part of initiating an emergency response.

Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology.
- Science experiments involving foods.
- Crafts using food packaging.
- Off-site events and school trips.
- Any other activities involving animals or food, such as animal handling experiences or baking.

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

Minimising risk

Hygiene procedures

Pupils will be taught how to maintain hygiene standards, such as:

- Pupils are reminded to wash their hands before and after eating.
- Sharing of food, food containers, and food utensils is not allowed.
- Parents ensuring that pupils have their own named water bottles, and lunch boxes provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended.
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance.

Catering

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

- Catering staff receive appropriate training and are able to identify pupils with allergies.
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements.
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers.
- Where changes are made to school menus, we will make sure these comply with legislation, and continue to meet any special dietary needs of pupils.

- Where food is provided by the school, staff will understand how to read labels for food allergens.
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

Insect bites/stings

In order to prevent and deal with insect bites/stings, staff will carry out and follow risk assessments and first aid procedures in school. For example, when outdoors:

- Shoes should always be worn.
- Food and drink should be covered.
- Medicine and first aid kits are carried or available at all times.

Animals

Staff will carry out and follow risk assessments and first aid procedures in school. For example:

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

Visits and trips

- No pupils with allergies will be excluded from taking part.
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training.
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip.
- Pupils at risk of anaphylaxis should have their own AAIs with them.
- Staff trained to administer adrenaline in an emergency will be present on the school trip.
- Appropriate measures will be taken in line with the school's AAI protocols for off-site events and school trips.

Procedures for handling an allergic reaction

All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately.

Staff are trained in the administration of adrenaline to minimise delays in an emergency.

If the pupil has an allergy action plan, this must be followed.

A spare school AAI device will only be used if:

- The pupil does not have a prescribed AAI.
- The pupil's prescribed AAI are not available or misfire.

Adrenaline devices (AAIs)

Prescribed AAIs

In school, AAIs will be:

- In an accessible location at all times.
- No more than 5 minutes away from where they may be needed.
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature.

A copy of the pupil's allergy action plan is accessible at all time, as it includes instructions on how it should be used in an emergency. AAIs are kept in school, unless the IHP says otherwise. Records are kept centrally (MIS and IHP) to show which pupils have been provided with prescribed adrenaline (and an allergy action plan).

Spare AAIs and inhalers

The allergy safety lead is responsible for sourcing spare AAIs and an emergency asthma reliver inhaler, as well as ensuring they are stored according to the guidance.

The spare AAIs are located in the emergency first aid trolley.

School will stock 4 AAIs (2 for the emergency trolley and 2 for school trips).

School will stock AAIs that have a 300 microgram dosage. School does not need to stock lower dose AAIs due to the age range of our school (7+).

Spare AAIs will be kept:

- In pairs, in case a second one is necessary.
- Separate from any pupils' prescribed AAIs and clearly labelled to avoid confusion.

Kate Holt and Rachel Blackwell are responsible for:

- Checking monthly that spare AAIs and the emergency asthma reliver inhaler are present and in date.
- Obtaining replacement AAIs when the expiry date is near.

Disposal

AAIs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions.

Using spare AAIs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

In an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

Use of AAIs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own AAIs with them on school trips and off-site events. Risk assessments and plans will be put in place before any trips or off-site visits to amend this, based on the needs of the pupil.

Serious incidents and 'near misses'

A serious incident is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A 'near miss' is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book and other relevant platforms, including the following information:

- Who was affected.
- What happened, when and where.
- Why the incident occurred (as far as is known).
- How staff and pupils responded and what was done to support the individual.
- Whether emergency services were called.
- How the incident concluded.

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

Incident reporting

The parents/carers of a pupil aged up to 16 should be notified of the incident or 'near miss' as soon as possible.

The school will share the report with the pupil's parents, the pupil or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with Rachel Blackwell. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalisation. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff.
- In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

Allergy awareness

Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel. These checks will be carried out via our vetting checks.

The school has purchased 'training pens' from EpiPen and Jext so staff can practise safely and be familiar with the differences.

Allergy awareness training will be provided to all staff and will be compliant with Benedict's Law and DfE/Gov guidance.

Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

Wellbeing

Pupils with allergies will have additional support through:

- Pastoral care.
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis.

Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

Monitoring arrangements

This policy will be monitored by the allergy safety lead and Headteacher.

It will be reviewed annually by the allergy safety lead (or more frequently if a serious incident or 'near miss' identifies an area for improvement) and approved by the school's Full Governing Body.

Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy.
- Supporting pupils with medical conditions policy.
- Data protection policy.
- Behavior policy.
- Safeguarding policy.