Allergy Safety Policy

Our Shared Vision



Equality Mission Statement

We are committed to ensuring equality of educational opportunity and support for all pupils, parents, carers, staff and visitors irrespective of age, sex, race, disability, religion or belief, sexual orientation, pregnancy, gender reassignment, and socio-economic background. We aim to provide a fully inclusive school in which every person feels proud of their identity and is able to participate fully within the school community. We believe that a diverse school community is a strength which should be respected and celebrated by all those who learn, teach and visit here.

Approved by: Site & Financial Management Committee	**Date:**
Signature (Chair of Committee):	**Signature (Headteacher):**

Last review date: September 2026	**Next review date:** September 2027

This policy covers many of the articles from the UN Convention on the Rights of the Child. Some key ones are listed below.

Article 3

All organisations concerned with children should work towards what is best for each child.

Article 6

Children have the right to live a full life. Governments should ensure that children survive and develop healthily.

Article 12

Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions considered.

Article 18

Both parents share responsibility for bringing up their children and should always consider what is best for each child. Governments should help parents by providing services to support them, especially if both parents work.

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DISTRIBUTION OF COPIES

Master Copy	Headteacher
Copy One	School Nurse / Healthcare professional
Copy Two	All First Aiders
Copy Three	School website

This policy document will be provided to the parents/carers of a child with an AAI in school and accessible to all parents/carers via the school website.

OTHER RELATED POLICIES

This policy should be read in conjunction with the following:

- Health & Safety Policy
- First Aid Policy (contained within the Health & Safety Policy)
- Supporting Pupils with Medical Conditions Policy
- Children with Health needs who cannot attend school Policy

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
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

STATEMENT OF INTENT

This Policy forms part of Becontree Primary School's overall policy on First Aid and Medicines.

The school recognises that Allergy and Anaphylaxis is a widespread condition and that it's severity varies considerably. As with any other medical condition, we are committed to ensuring that any pupils with allergies are fully supported at school.

Procedures for administering medicines and providing first aid are in place and are reviewed regularly. We will ensure all staff (including supply staff) are aware of First Aid arrangements and that sufficient trained staff are available to implement this policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

BACKGROUND, including legislation and guidance

From 1st October 2017 the Human Medicines (Amendment) Regulations 2017 has allowed schools to buy AAIs, without a prescription, for use in emergencies. The school has decided to have such AAIs available for emergency use.

The emergency AAI will only be used by children, for whom written parental consent (see Annex A) for use of the emergency AAI has been given, who have been diagnosed with Anaphylaxis and prescribed an AAI. These children should have a current HCP or have one pending.

The AAI can be used if the pupil's prescribed AAI is not available, e.g. because it is faulty.

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:

- Children's Wellbeing and Schools Act 2026
- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

ARRANGEMENTS

Under our First Aid & Medicines Policy, parents are required to notify the school of any medical condition so that their child can receive appropriate support. The parents are required to give their consent to the administering or supervising administration of the child's own AAI. At the same time they will be asked to give their consent to the use of the emergency AAI if for any reason the child's own AAI is not available.

Note: *The main risk of allowing schools to hold an AAI for emergency use is that it may be administered inappropriately to a child who does not have anaphylaxis. It is essential therefore that schools ensure that the AAI is only used by children who have been prescribed an AAI and for whom written parental consent has been given.*

RESPONSIBILITIES

The governing board

The governing board is responsible for:

- Ensuring 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
- Reviewing and approving the allergy safety policy at least annually
- To allocate the role of Allergy safety governor

Allergy safety governor

The allergy safety governor is Mrs Karen Brissett. They are responsible for:

- Taking steps to ensure the allergy safety policy is:

- Generally known within the school and to parents of pupils at the school
- At least once a year, brought to the attention of all pupils, parents/carers, staff and volunteers
- Published on the school's website

› Ensuring risks relating to pupils with allergies are included in the risk register and actively managed

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

Allergy safety lead

The nominated allergy safety lead is Mrs Clare Stock (Deputy Headteacher).
They're responsible for:

› Implementing this allergy safety policy
› Contributing to the review of the allergy safety policy
› Promoting and maintaining allergy awareness across our school community
› Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AAI)
› 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
- 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
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP

Headteacher

The headteacher 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

Allergy safety lead practitioner (and deputy)

The allergy safety lead practitioner is Mrs Michelle Smallman. The deputy allergy safety lead practitioner is Mrs Tracy Halliday. They are responsible for:

› Supporting the allergy safety lead to implement the allergy safety policy
› Checking spare AAIs are present and in date on a monthly basis
› Making sure that replacement AAIs are obtained when expiry dates approach

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

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 brought in to be shared
- Updating the school on any changes to their child's condition
- Updating the lunch order system, SchoolGrid to make sure allergens are clear

Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AAI on their person and only using it for its intended purpose
- Understanding how and when to use their AAI

Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers

Older pupils might also be expected to support their peers and staff in the case of an emergency.

STORAGE OF PUPIL'S OWN AAIs

AAIs clearly need to be quickly accessible in the event of an allergic reaction. Pupil's AAIs will be clearly labelled and stored away from direct sunlight, and extremes of temperature.

They are stored in the following places:

Nursery pupil	Nursery office
Reception – Year 2	First Aid Room
Zen Den & Year 3-4	Staff room
Year 5-6	KS2 Deputy Headteachers office
ARP	ARP First Aid box

In extreme circumstances, such as severe need, children will be allowed to carry their own when they are considered mature enough to do so, otherwise when need dictates the AAI will be managed by the class teacher/adult.

EMERGENCY AAIs

Supply and storage

The school will purchase AAIs from a reputable pharmaceutical supplier, such as the local pharmacy.

The school will hold 2 Junior AAIs (150 microgram) and 2 AAIs (300 Microgram). The school will also hold;

- Instructions on using the AAI
- instructions on storing the AAI;
- manufacturer's information; a checklist of AAIs, identified by their batch number and expiry date, with monthly checks recorded;
- a list of children permitted to use the emergency AAI (parental consent);
- a record of administration (i.e. when the AAI has been used).

The emergency AAIs will be stored in the first aid room

They will be kept separate from any pupil's AAIs which are stored nearby and will be clearly labelled to avoid confusion with pupil's own AAIs.

Usage

The emergency AAI will only be used by pupils:

- who have been diagnosed with anaphylaxis, and prescribed with an AAI;
- **AND** for whom written parental consent (see Annex A) for use of the emergency AAI has been given. This consent form will be stored with the child's AAI and consent recorded on a list with the emergency AAIs.

Disposal

Once an AAI has been used it cannot be reused and must be disposed of according to manufacturers guidelines. Used AAIs can be given to the ambulance staff on arrival or can be disposed of in a pre-ordered sharps bin for collection by the local council.

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.
The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.
However, 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.

ASSESSING RISK

DEFINITION

Anaphylaxis is a severe, potentially life-threatening allergic reaction. It can occur within seconds or minutes of exposure to something that someone is allergic to.
Common triggers include:

- Foods
- Medicines
- Insect stings
- General anaesthetic (NHS)

As nuts are a common food trigger, the school has adopted a Nut Free Statement (See annex B)

The school will conduct a risk assessment for any pupil at risk of contact with an allergen 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

To prevent contamination:

- Pupils are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- 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
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- 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
- Point of service IT equipment highlights pupil allergens

Insect bites/stings

When outdoors:
- Shoes should always be worn
- Food and drink should be covered
- Extraordinary insect activity is monitored and pest control is considered where necessary

Animals
- 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 these 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 contact with an allergen 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 (see below)

DAY TO DAY SIGNS AND SYMPTOMS OF ALLERGIC REACTION

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or red itchy skin rash
- Abdominal pain, vomiting or diarrhoea
- Sudden change in behaviour
- Sneezing, runny or blocked nose
- Red watery itchy eyes
- Wheezy cough

SIGNS OF ANAPHYLAXIS (life threatening allergic reaction)

- Persistent cough
- Hoarse Voice
- Difficulty swallowing, swollen tongue and throat
- Difficulty breathing
- Persistent dizziness or light headedness
- Becoming pale or floppy
- Suddenly sleepy, collapse, unconscious
- Confusion
- Blue skin or lips

Mild-moderate symptoms are usually responsive to an antihistamine. The child does not normally need to be sent home from school or require urgent medical attention. However, mild reactions can develop into anaphylaxis, children having a mild-moderate reaction should therefore be monitored closely.

WHAT TO DO IF ANY SYMPTOMS OF ANAPHYLAXIS ARE PRESENT

Anaphylaxis commonly occurs together with mild symptoms or signs of allergy, such as skin rash or itchy mouth. Anaphylaxis can also occur on its own without any mild signs. In the presence of any severe symptoms, it is vital that an AAI is administered without delay.

You should administer the pupils own AAI if available. The AAI can be administered through clothing and should be injected into the upper outer thigh in line with the manufacturer's instructions.

Do not move the child, as standing someone up with anaphylaxis can trigger cardiac arrest. Provide reassurance. The child should lie down with their legs raised, if breathing is difficult allow the child to sit.

ALWAYS CALL 999 AND REQUEST AN AMBULANCE WHEN AN AAI IS USED

When dialling 999, inform the controller that the person is suffering from anaphylaxis and an AAI has been administered.

RECORDING USE OF THE AAI & INFORMING PARENTS/CARERS

Use of the AAI should be recorded. This should include where and when the episode took place, e.g. PE lesson, playground, classroom and the member of staff administering medication. *Our policy Supporting pupils with Medical Conditions* requires written records to be kept of all medicines administered to children.

Any use of an AAI must be communicated to parents as soon as possible. If the emergency AAI is used the parent will be informed and a new AAI will be ordered immediately.

STAFF TRAINING

All staff are expected to be:

- Trained in allergy awareness
- aware of this policy and how to access it;
- aware of how to check if a child requires an AAI;
- aware of how to access the AAI;
- aware of who the designated members of staff are.

The school will ensure that designated staff are trained in:

- recognising an allergic reaction, and distinguishing them from other conditions with similar symptoms;
- responding appropriately to a request for help from another member of staff;
- recognising when emergency action is necessary;
- administering AAI in line with the schools policy, as directed by a designated school nurse;
- keeping appropriate records.

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 on an accident/incident form, 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

Parents/carers 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 the allergy safety lead, who 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 hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See how to make a RIDDOR report]
- To the local authority: any allergen-related food safety incidents. [See how to report a food safety issue]

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.

WELLBEING

Pupils with allergies may be at risk of bullying and may also suffer from anxiety and depression relating to their allergy. The school supports mental health needs of all pupils but has a greater awareness for those with an increased risk.

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher
- 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

The school will respond to any instance of bullying in line with its behaviour policy.

Wellbeing support following an incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the pupil but their family, those involved in responding. and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See section on 'Serious incidents and near misses' of this policy for more details.

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

The arrangements set out in this policy will be monitored by the allergy safety lead.

The governing board will review and approve this policy annually, or more frequently if a serious incident or ‘near miss’ identifies an area for improvement.

ANNEX A

Becontree Primary School

Stevens Road, Dagenham, Essex RM8 2QR
Tel: 020 8270 4900
E-mail: office@becontreeprimaryschool.com
www.becontreeprimaryschool.com

Headteacher: Mrs M. Ziane
Deputy Head (EYFS/KS1): Mrs C. Stock
Deputy Head (KS2): Mrs L. Stonier

PARENTAL CONSENT FORM:
USE OF CHILD'S AAI MEDICATION (AND THE USE OF AN EMERGENCY AAI)

1. I can confirm that my child has been diagnosed with anaphylaxis and has been prescribed an AAI.

2. My child has 2 in-date AAI devices. They are clearly labelled with their name and have been provided to the school office.

3. In the event of my child displaying symptoms of allergic reaction, I consent to the school administering their AAI.

4. If their own AAI is not available or is unusable, I consent for them to receive an emergency AAI held by the school for such emergencies.

Child's name: …… Class: ……

Parent/Carer Name & Address: ……

……

……..……..

Telephone contact number: ……

E-mail address: ……

Signed: …… Date: ……

Nut Free Statement **ANNEX B**

Why are we a Nut Free School?

- ✓ To keep children and adults who are allergic to nuts, safe.

Did you know that adults and children who suffer from nut allergies…?

Can have a severe, potentially **life-threatening allergic reaction**.
Can have a severe reaction by just **being touched** on the skin by someone who has eaten nuts.
Can have a severe reaction by just **smelling the breath of someone** who has eaten nuts.



Below are some examples of foods to avoid when making your child's packed lunch…

X Peanut butter	X Chocolate spreads
X Some granola bars	X Cereal bars
X Biscuits/cookies that contain nuts	X Cakes that contain nuts
X Peanut butter cakes	X Sauces that contain nuts, e.g. satay sauce

This list does not include all foods that contain nuts, so please check the packaging of products carefully.