# ALLERGY POLICY

THIS POLICY IS REVIEWED ON AN ANNUAL BASIS

**Policy reviewed by:** Jonathan Ritchie – Executive Director of Property & Development

**Review date:** September 2026

**Version:** v9.1

**Policy actioned from:** September 2026

**Next review date:** June 2027

**Reviewer's Signature:** 

Please note: 'School' refers to Chatsworth Schools; 'parents' refers to parents, guardians and carers.

This is a whole school policy, which also applies to the Early Years Foundation Stage.

CHATSWORTH SCHOOLS

# POLICY AMENDMENT PAGE

| Date | Key Amendments | Version Number | Reviewed by |
|---|---|---|---|
| 26/06/2026 | Policy Approved – Fit for use by schools. | v9.0 | JR |
| 16/09/2026 | Allergy Safety Leadership section added on page 4. New section added, entitled : 'Serious Incidents and Near Misses' on pages 15 & 16. Additional bullet point added under the section, entitled : 'Member(s) of Staff Responsible for Medical Needs' on page 7. Additional bullet point added under the section, entitled : 'School Advisory Board' on page 5. 'Policy Availability' section added on page 3. Paragraph added to the section, entitled : 'Training' on page 17. Additional bullet point added under section, entitled : 'Training' on page 17. New section added, entitled : 'Information Sharing and Confidentiality' on pages 16 and 17. New sub-heading, entitled : 'Parent Reporting of Allergy Incidents' added to the new section, entitled : 'Serious Incidents and Near Misses' on page 16. Additional paragraph added under the section, entitled : 'Training' on page 17 regarding undertaking periodic allergy emergency drills. | v9.1 | JR |
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## Statement of Intent

Broughton Manor Prep School and Nursery is committed to promoting a whole school approach to health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way. By our actions we will work proactively to:

- minimise the risk of exposure within the school setting
- encourage self-responsibility
- learn avoidance strategies
- have robust plans for an effective response to possible emergencies
- ensure inclusivity for all pupils

## Policy Availability

This policy will be published on the school's website and will be available in hard copy upon request from the school office.

## Equalities Statement

Our school is clear about the need to actively support pupils with medical conditions to participate in school life.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all aspect of school life.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professional will be consulted.

## Context

Food allergies are increasing in both developed and developing countries, especially in children and the severity and complexity of food allergy is also increasing. Food allergy can be fatal, and an appropriate diagnosis is essential in parallel with the need for clear food labelling worldwide.

Around 5-8% of children in the UK live with a food allergy and most school classrooms will have at least one allergic pupil. These young people are at risk of anaphylaxis, a potentially life-threatening reaction, which requires an immediate emergency response. 20% of severe allergic reactions to food happen whilst a child is at school, and these reactions can occur in children with no prior history of food allergy. It is essential that staff recognise the signs of an allergic reaction, symptoms and can manage it safely and effectively.

**Schools have a legal duty to support pupils with medical condition, including allergy.**

## Principles

- To comply with all relevant environmental legislation, regulations and requirements.

- To encourage proactive steps to keep pupils safe.
- To ensure pupils from diverse backgrounds, ethnicities or different cultural heritages are not disadvantaged when dealing with allergies and food labelling.
- To work with the catering providers to establish a robust process and documentation for menu planning, food labelling, storing, avoidance of cross-contamination, stock ordering of food/drink used at the school.
- To provide an effective staff awareness programme on food allergies and intolerances, possible symptoms (anaphylaxis) recognition and actions to take.
- To develop a pupil awareness programme through PHSE and other curriculum areas.

## Allergy Management Checklist

- Does the child have an Individual Healthcare Plan (IHP)?
- Has your school purchased spare pens?
- Does each child have a completed and signed Allergy Action Plan (AAP)?
- Have ALL school staff been trained in allergy and anaphylaxis?
- Does the allergy policy include where and how to store AAIs?
- Is there a schedule to check the expiry dates on spare AAIs and each child's AAI?
- Does the allergy policy cover catering for children with allergies?
- Does the allergy policy include pupil allergy awareness?
- Has the school completed an allergy risk assessment?
- Does the allergy policy include risk assessment of extra-curricular activities?
- Does the allergy policy cover safeguarding children with allergies, including bullying?

## Practical Steps (see also Appendix I & Appendix II)

To put these principles into practice we will:

### Allergy Safety Leadership

The Head designates Mrs Trish Mullholland (Business Manager) as the school's Allergy Safety Lead with responsibility for the implementation, monitoring, review and reporting of this policy. The Allergy Safety Lead will oversee allergy safety arrangements, coordinate staff training, monitor incidents and near misses, ensure Individual Healthcare Plans (IHPs) and Allergy Actions Plans (AAPs) remain current, and report periodically to the Head and School Advisory Board. This role will be fulfilled by a member of the Senior Leadershp Team.

**School Advisory Board**

- Ensure the school has a strategic vision for the management of allergy risk assessment and emergency procedures
- Delegate the day-to-day responsibility for the effective delivery of this Policy to the Head
- Ensure the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy, are robust and effective
- Ensure that the school provides appropriate training, information, instruction, induction and supervision on a regular basis to enable everyone to stay safe regarding allergies and their management. It is good practice to log all training and attendees
- Ensure adequate resources for managing allergies are available
- Ensure appropriate material is available on the school website for parents highlighting how the school is managing pupils with allergies
- Monitor the effectiveness of this Policy to ensure it remains fit for purpose
- Receive periodic reports regarding allergy-related incidents, near misses and lessons learned.

**Head**

- Provide, as far as practicable, a safe and healthy environment in which people at risk of allergic reaction and anaphylaxis can participate equally in all aspects of school life and are not subject to bullying because of their condition
- Ensure all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitments to allergy management as part of Safeguarding
- Ensure the curriculum contains age-appropriate content so all pupils can learn about allergies and how everyone can support those who have them
- Create links at strategic level with healthcare professionals and catering providers and ensure at operational level that links are robust
- Ensure that up-to-date allergy information for pupils is accessible to catering teams
- Ensure there is a workable School Emergency Plan in place that is known by all staff
- Ensure the school sends a copy of the medical details it holds for the child parents for review and update at the end of each school year. Seek updated medical information at the commencement of each calendar year and for any pupil joining in year
- Where the pupil has an Individual Healthcare Plan (IHP), ensure the involvement of healthcare & welfare professionals, teaching and catering staff, parents and the pupil in establishing IHPs.

- Encourage parents to provide Allergy Actions Plans (AAPs) completed and signed by a healthcare professional that can be kept with their medication with copies made available for all staff to access and help the school support the pupil
- Ensure effective communication of individual pupil medical needs to all staff and that they know how and where to check the updated information
- Ensure there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff absences away from the school premises
- Ensure First Aid staff training includes anaphylaxis management, including awareness of triggers, anaphylaxis and first aid emergency procedures
- Ensure an adequate risk assessment is undertaken prior to any school trips, excursions or off-site extra-curricular activities for pupils who have allergies
- Ensure records of pupils medically prescribed an AAI and its use are kept correctly
- Ensure pupil documentation and in date medication is kept correctly and safely
- Ensure best practice in the labelling of foodstuffs and their contents
- Report to the School Advisory Board regarding the management of allergies within the school

**Member(s) of Staff Responsible for Medical Needs**

- Follow all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context
- Report to the head regarding pupils with allergies
- Lead on the training of staff regarding allergy medical needs and their identification and management
- Work closely with sub-contracted Chef Managers in assisting in the support of pupils with known allergies (including meeting with parents where requested) to discuss any special requirements
- Monitor where there is a school 'tuck shop' or home baked items are brought into school
- Liaise with parents of pupils with known declared allergies to produce a risk assessment for their child that includes sharing of information, allergy management, risk minimisation and emergency actions
- Wherever possible use an AAP for pupils with recognised allergies and keep it with their medication. Ensure copies of the AAP are available for all staff to access
- If an additional written IHP is not required, ensure that the AAP is viewed and treated with the same level of seriousness
- Ensure all copies of the AAP/IHP located around the school and/or on IT systems are identical if an updated version is received

- Where an AAP has not been received for a pupil with recognised allergies, or if the medication information is not clear, liaise with GP/school nursing team to obtain an up-to-date copy and/or clarification
- Ensure medication is stored in a rigid box and clearly labelled with the pupil's name and a photograph (older pupils should carry their AAIs and medication with them)
- Be trained in the use of an Adrenaline Auto-Injector (AAI) and be competent in performing any possible required prescribed medical treatment as outlined in the pupil's IHP and/or AAP
- Ensure that any other staff involved with those pupils requiring the use of an AAI are also adequately trained and competent
- Ensure all school trips, excursions or off-site extra-curricular activities for pupils are pre-checked so that 'safe' food is provided or that an effective control is in place to minimise risk of exposure for pupils with allergies
- Ensure the school has an audited spare supply of in date AAIs that are kept in a safe space at room temperature that is accessible, secure but not locked away and all staff are aware of the location
- Monitor the use of all AAIs to ensure they are within the expiry date including those brought into the school by pupils or external sources and are of the correct dosage
- Arrange for the correct disposal of out-of-date AAIs
- Where anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state ANAPHYLAXIS is suspected, then follow their advice as to whether administration of a spare AAI is appropriate
- Record all emergency uses of AAIs or reports of suspected emergencies
- Ensure that, if a pupil notifies school that they are no longer allergic to a food, this information is checked prior to updating records and the IHP (if applicable)
- Maintain records of allergy-related serious incidents and near misses and coordinate post-incident reviews to identify lessons learned and any necessary improvements to control measures, Individual Healthcare Plans (IHPs) or Allergy Action Plans (AAPs).

**All Staff**

- Follow as directed all the requirements of the school, including all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context
- Complete appropriate anaphylaxis training and be confident to respond to an allergy emergency
- Raise awareness about allergies and anaphylaxis amongst their pupils in the classroom and around school, especially in dining areas
- Encourage self-responsibility and learned avoidance strategies amongst pupils living with allergies

- Help all pupils understand, which foods are safe for those with allergies and how they can support other pupils with specific dietary needs to stay safe
- Highlight the need for anti-bullying of pupils with the condition
- Be aware of the pupils in their case (including regular cover classes) who have known allergies as an allergic reaction could occur at any time, not just at breaks or mealtimes
- Any food-related activities must be supervised with due caution whilst following best practice for storing, preparing, cooking and serving food
- Any staff leading on a school trip must check that all pupils with medical conditions, including allergies, are carrying their medication (those unable to produce their required medication would not be able to attend the excursion)
- Staff leading a school trip, excursion or off-site extra-curricular activity must ensure they carry all relevant emergency supplies with then

**Parents**

- Notify the school of the pupil's allergies
- Inform the school of any changes as soon as known
- Talk with your child about allergy self-management, including what foods are safe and unsafe, how to read food labels, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult if experiencing an allergic reaction
- Provide an AAP completed by a healthcare professional that can be kept with their medication and help the school support the pupil
- Contribute to the provision of an IHP in partnership with the school, and relevant healthcare professional, where required
- Provide any other written medical documentation, instructions and medications as directed by a health professional
- If you require it, meet with the Chef Manager to discuss any specific requirements relating to your child's allergy (information form these meetings will be recorded by the Chef Manager)
- Be aware of the school Allergy Policy and any arrangement for managing children with allergies and at risk of anaphylaxis
- Communicate regularly with the school to support our ability to keep our children safe and act immediately in the event of an allergic reaction
- Provide appropriate in date medication (two AAIs) of the correct dosage and register their AAIs on the manufacturer's websites to receive text alerts for expiry dates
- Providing appropriate foods to be consumed by the child if necessary

- Replace medications after use of upon expiry
- Review the Policy and procedures with the school's Head and/or Member of Staff Responsible for Medical Needs, the pupil's doctor and the pupil (if age appropriate) after a reaction has occurred

**Pupil with Allergies (as age appropriate)**

- Have a good awareness of their allergy and support the knowledge of peers in helping keep them safe
- Be proactive in the care and management of their food allergies and reactions and medication
- Be sure not to exchange food with others and take care to avoid any foods, which may cause an allergic reaction
- Read food labelling, but, if unsure, avoid the food
- Avoid eating anything with unknown ingredients
- Know where their medication is kept and (if age appropriate and confident enough to administer their own auto-injectors) take responsibility for always carrying AAIs on their person
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult

## Supply, Storage and Care of Medication

Depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to always carry their own two AAIs on them

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit, which is kept safely, not locked away and **accessible to all staff.**

Medication should be stored in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain:

- Two AAIs i.e. EpiPen or Jext
- An up-to-date allergy action plan (AAP)
- Antihistamine as tablets or syrup (if included on allergy action plan (AAP))
- Spoon if required
- Asthma inhaler (if included on allergy action plan (AAP))

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however, the Lead First will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

## Older Children and Medication

Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on **very suddenly,** so school staff need to be prepared to administer medication if the young person cannot.

## Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

## Disposal

AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharp bins to be obtained from and disposed of by a clinical waste contractor.

The sharps bin is kept in the following room: Reception Office

## Spare AAIs

Schools can now legally purchase and store spare Adrenaline Auto-Injectors (AAIs for children at risk of anaphylaxis). Immediate access to an AAI can be lifesaving. While it's vital that families have their own prescribed AAIs for their child, having spare AAIs at school adds an extra layer of reassurance for everyone involved. It's a step towards creating a safer and more inclusive environment for children managing severe allergies.

## Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014, which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

The termly school menu is available for parents to view at the beginning of each term with all ingredients listed and allergens highlighted on the school website at:

The Lead First Aider will inform the Chef Manager of pupils with food allergies.

To ensure that kitchen and catering staff can readily identify pupils with allergies or food intolerances, an up-to-date list of affected pupils is provided to relevant staff. The list clearly identifies each pupil's allergy or intolerance and uses a colour-coded system to indicate the severity of the condition.

In addition, all pupils with a known allergy or food intolerance are required to wear a lanyard displaying their name and the relevant allergy or intolerance while in the dining hall. This provides an additional visual identification measure and supports catering staff in ensuring that pupils receive appropriate meals and avoid foods that may pose a risk to their health and wellbeing.

Parents are encouraged to meet with the Chef Manager to discuss their child's needs.

The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- If food is provided by the school caterers, parents should check the appropriateness of foods by speaking directly with the Chef Manager.
- The pupil should be taught to also check with catering staff, before selecting their lunch choice.
- Where food is provided by the school or school caterers, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents are encouraged to liaise with the Chef Manager.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

### Allergy Awareness and Nut Bans

The school supports the approach advocated by many allergy charities towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

A 'whole school awareness of allergies' is a much better approach, as it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

### Risk Assessment

The school will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processed for keeping allergic children safe.

**Chatsworth Schools – Anaphylaxis Risk Assessment**

This form should be completed by the setting in liaising with the parent and the child, if appropriate. It should be shared with everyone who has contact with the child/young person:

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| Child/Young Person Name: | Date of Birth: |
| Setting/School:<br><br>Phase: Primary/Secondary: | Key Worker/Teacher/Tutor |
| Name and role of other professionals involved in this Risk Assessment (i.e. Specialist Nurse or School Nurse) | |
| Date of Assessment: | Reassessment due (this would usually be annually, unless there is an incident, at which point the risk assessment should be reviewed): |
| **I give permission for this to be shared with anyone who needs this information to keep the child/young person safe:**<br><br>**Signatures:**<br><br>Setting Manager/Head: Date:<br><br>Parents/Carers: Date:<br><br>Child/Young Person: Date: | |
| What is the child/young person allergic to?<br><br>Allergen exposure risks to be considered:<br><br>Ingestion ☐<br><br>Direct contact ☐<br><br>☐ | |

| |
|---|
| Indirect contact |
| Does this child already have an Allergy Action Plan (AAP) or an Individual Healthcare Plan (IHP)?<br>Yes ☐<br>No ☐<br>Is the child prescribed adrenaline auto-injectors (AAIs)?<br>Yes ☐<br>No ☐<br>Summary of current medical evidence seen as part of the risk assessment (copies attached) |
| Key Questions – Please consider the activities below and insert any considerations that need to be put in place to enable the child to take part. |
| **Activities** |
| Crayons/painting: |
| Creative activities: i.e. craft paste/glue, pasta: |
| Science type activity: i.e. bird feeders, planting seeds, food: |
| Musical instrument sharing (cross contamination issue): |
| Cooking (food prep area and ingredients): |
| Mealtime: |

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| Kitchen prepared food (is allergy information available):<br><br>Packed lunches: |
| Snacks (is allergy information available): |
| Drinks: |
| Celebrations: e.g. Birthday, Easter: |
| Hand washing: |
| Indoor play/PE (AAIs to be with the child): |
| Outdoor play/PE (AAIs to be with the child): |
| School field (AAIs to be with the child): |
| Forest school (AAIs to be with the child): |
| Offsite trips (are staff who accompany trip trained to use AAI?): |
| **Allergy Management** |

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| Does the child know when they are having an allergic reaction? |
| What signs are there that the child is having an allergic reaction? |
| What action needs to be taken if the child has an allergic reaction? |
| If the medication is stored in one secure place are there any occasions when this will not be within 5 minutes reach if required?<br>Yes ☐<br>No ☐<br>If Yes state when and how this can be adjusted: |
| If the child is trained and confident can the medication be carried by them throughout the day?<br>Yes ☐<br>No ☐<br>If No state reason: |
| Does the child have two of their own prescribed AAIs? |
| How many staff need to be trained to meet this child's need? |
| Are there any backup spare AAIs available and where are they located? |

| Outcome of Risk Assessment | |
|---|---|
| **New Allergy Action Plan (AAP)/Individual Healthcare Plan (IHP) required?** | |
| **YES** | ☐ |
| **NO** | ☐ |
| **Existing Allergy Action Plan (AAP)/Individual Healthcare Plan (IHP) to be updated?** | |
| **YES** | ☐ |
| **NO** | ☐ |

## Serious Incidents and Near Misses

The school is committed to learning from all allergy-related incidents and near misses to continuously improve allergy safety arrangements.

A **serious incident** is any event relating to a pupil's allergy that results in, or places them at immediate and significant risk of, harm, including where emergency medication is administered, emergency medical treatments is required, or emergency services are contacted. A **near miss** is an event that did not result in harm but had the potential to do so had circumstances been slightly different.

The school will:

- Record all allergy-related serious incidents, near misses and emergency uses of medication.
- Ensure that all incidents reported by pupils, parents, staff, healthcare professionals or other relevant parties are considered and recorded where appropriate.
- Inform parents as soon as reasonably practicable following a serious incident involving their child.
- Review the circumstances of all serious incidents and near misses to identify lessons learned.
- Consider whether amendments are required to risk assessments, Individual Healthcare Plans (IHPs), Allergy Action Plans (AAPs), staff training arrangement or this Policy.
- Report significant incidents and emerging trends to the Allergy Safety Lead, Head and School Advisory Board as appropriate.
- Maintain a culture of openness and continuous improvement, focusing on learning and prevention rather than blame.

Following any serious incident or near miss, the school may review this Policy and any associated procedures to ensure that arrangement remain effective and reflect lessons learned.

**Parent Reporting of Allergy Incidents**

Parents should notify the school as soon as reasonably practicable if their child experiences an allergic reaction, receives medical treatments, attends hospital, or suffers any allergy-related incident that may be connected to activities, food provision or allergen exposure at school. This includes incidents that become apparent after the pupil has left the school site.

Reports received from parents, pupils, healthcare professionals or other relevant parties will be reviewed by the Allergy Safety Lead and/or Member of Staff Responsible for Medical Needs. Where appropriate, the incident will be recorded as a serious incident or near miss and investigated in accordance with the school's procedures.

The school will consider any lessons learned from such reports and determine whether updates are required to Individual Healthcare Plans (IHPs), Allergy Action Plans (AAPs), risk assessments, staff training arrangements or this Policy. Significant findings will be shared with relevant staff and reported to the School Advisory Board where appropriate.

## Information Sharing and Confidentiality

The school recognises that information relating to a pupil's allergy is personal and sensitive. Information will be collected, held, used and shared only where necessary to safeguard the health, safety and wellbeing of the pupil and to enable the school to meet its legal duties.

Relevant information regarding a pupil's allergy, including any Individual Healthcare Plan (IHP), Allergy Action Plan (AAP), emergency procedures and medication requirements, will be shared with staff who need the information to support the pupil safely and effectively. This may include teaching staff, support staff, first aiders, catering staff, educational visit leaders and other appropriate personnel.

The school will process and share information in accordance with UK GDPR, data protection legislation and the school's Data Protection Policy. Information will be shared in a proportionate and respectful manner, ensuring that confidentiality is maintained whilst enabling staff to fulfil their safeguarding and duty-of-care responsibilities.

Parents are expected to provide accurate and up-to-date information regarding their child's allergy and to notify the school promptly of any changes. The school will take reasonable steps to ensure that allergy-related information remains accurate and current.

## Training

All staff who are present during times when pupils are on site will receive allergy awareness training at least annually. This includes permanent staff, temporary staff, supply teachers, agency staff, peripatetic staff, regular volunteers, wraparound care staff, catering staff and any other staff who may supervise pupils. Allergy awareness training is in addition to general first aid training and will be refreshed annually or sooner where required.

**The school may undertake periodic allergy emergency drills to test arrangements, assess staff readiness and identify opportunities for improvement. Outcomes from such drills may be used to inform staff training, risk assessments and policy reviews.**

Allergy training should include a practical session (trainer AAIs are available to order through the manufacturer's website.) Training should include basic understanding of allergic disease and its risks, which include:

- Knowing the common allergens and triggers of allergy
- Spotting he signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
- Administering emergency treatment (including AAIs) in the event of anaphylaxis – knowing how and when to administer the medication/device
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance
- Knowing who is responsible for what
- Associated conditions e.g. asthma
- Managing Allergy Action Plans (AAPs) and ensuring these are up to date
- Allergy awareness training records will be maintained by the school and reviewed annually to ensure all required staff remain in date with training requirements.

## Allergies and Bullying

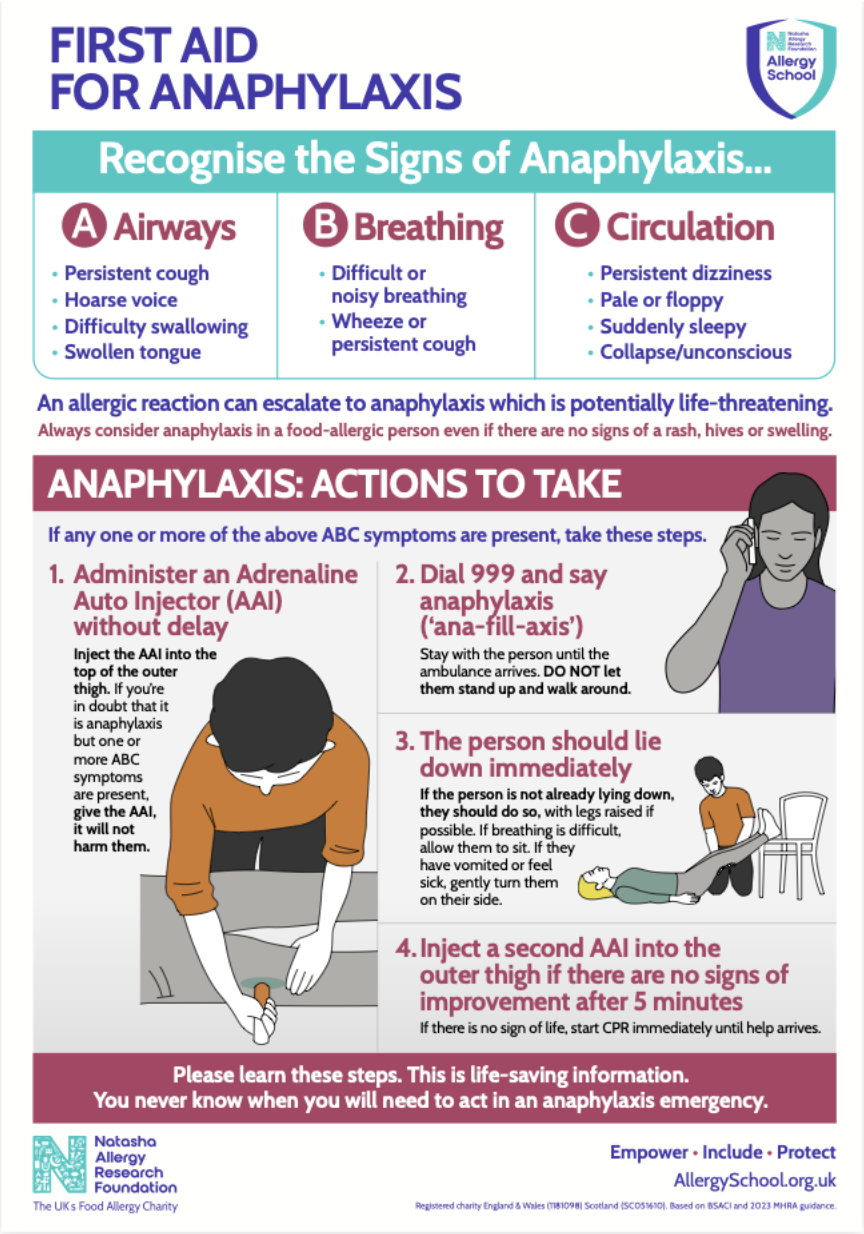
By law, all schools must have a behaviour policy in place that includes measures to prevent all forms of bullying among pupils, and this is a policy decided by the school. All teachers, pupils and parents must be told what it is, and allergy bullying should be treated seriously, like any other bullying. Schools must, under Section 100 of the Children and Families Act 2014, aim to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school, so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

The Department for Education has provided statutory guidance for schools and colleges on keeping children safe in education. Please view the guidance here: https://www.gov.uk/government/publications/keeping-children-safe-in-education--2

Other useful websites include:

- NSPCC - https://www.nspcc.org.uk/keeping-children-safe/types-of-abuse/bullying-and-cyberbullying/
- National Bullying Helpline - https://www.nationalbullyinghelpline.co.uk
- Family Lives - https://www.coramfamilylives.org.uk/advice/bullying/
- Kidscape - https://coramkidscape.org.uk
- Anti-Bullying Alliance - https://anti-bullyingalliance.org.uk
- Young Minds - https://www.youngminds.org.uk/young-person/coping-with-life/bullying/
- Childline - https://www.childline.org.uk

- **Appendix I – First Aid for Anaphylaxis Poster**



## Appendix II – EpiPen AAI and Jext AAI Instructions

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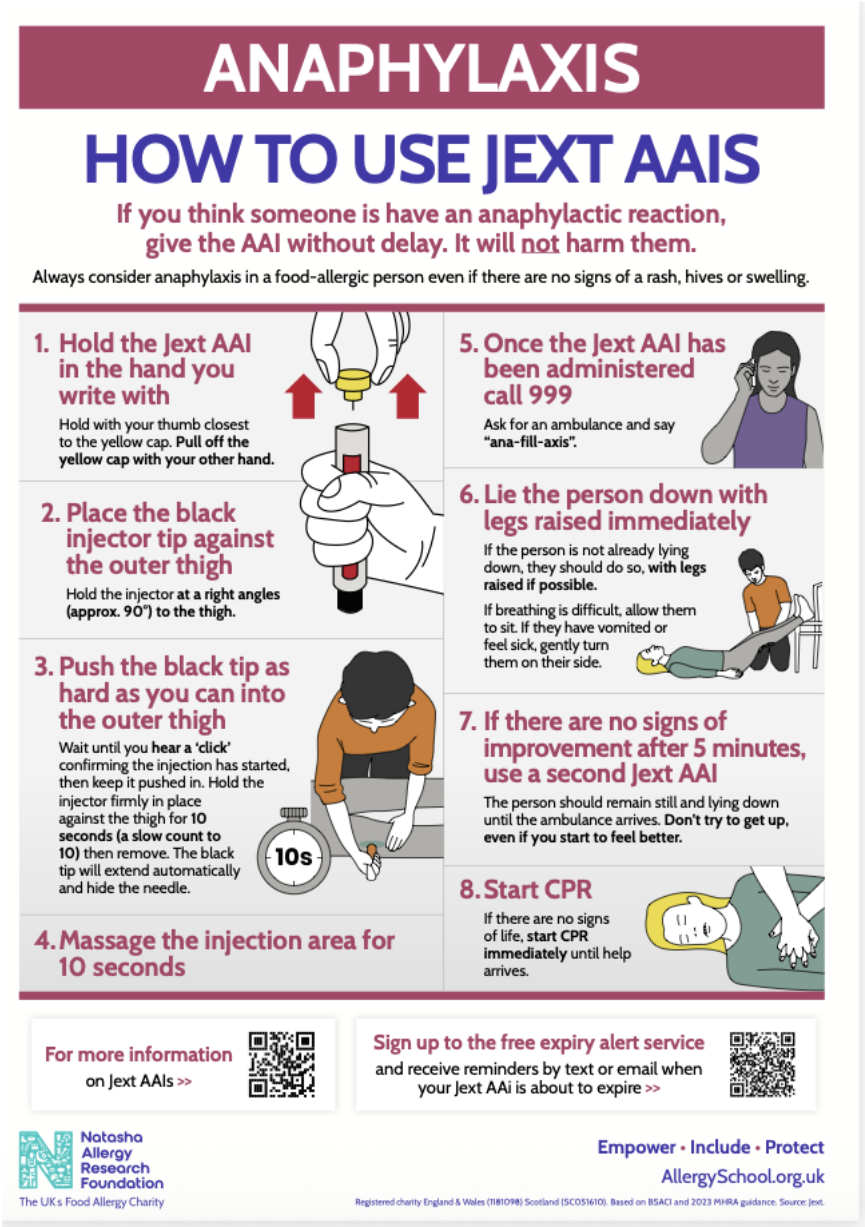

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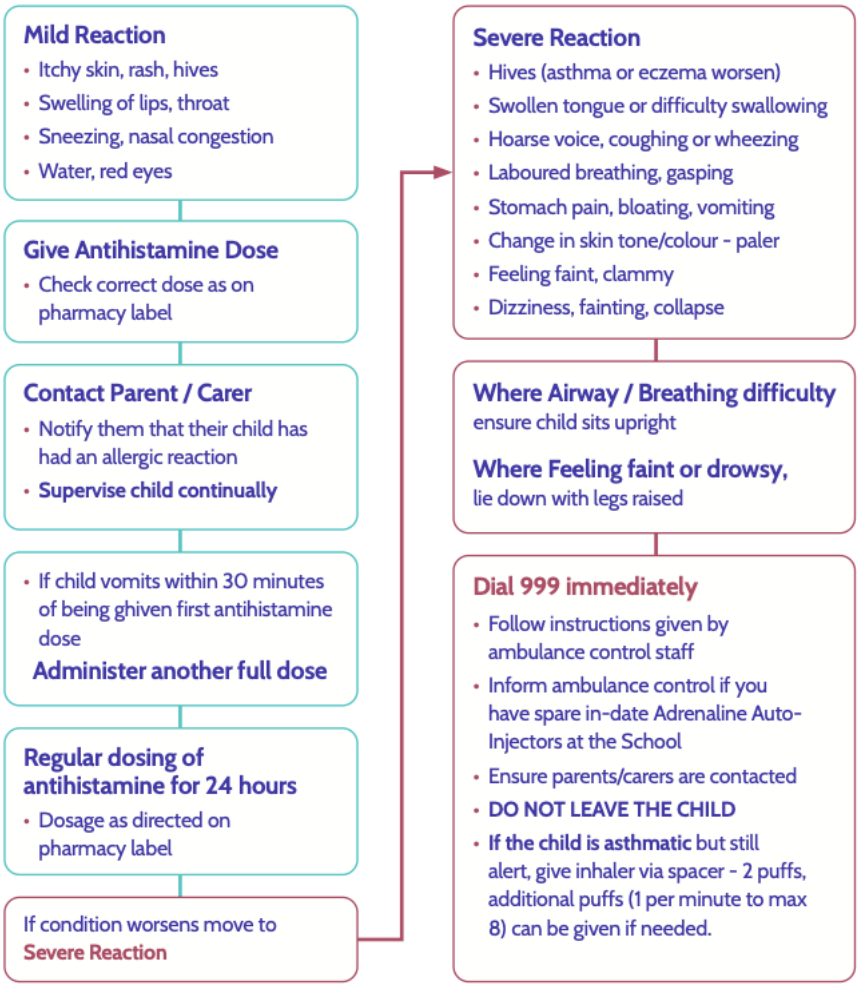
## Appendix III

**Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.**

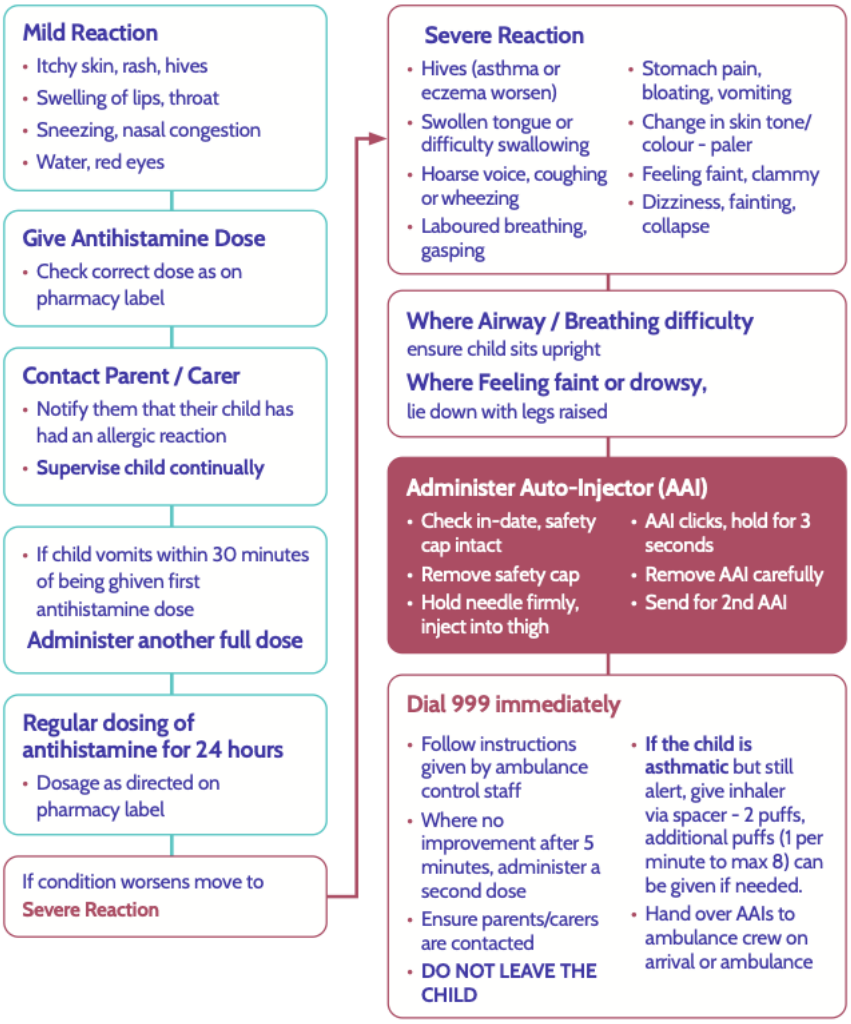
Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed



## Appendix IV

**Flowchart for Allergic Reaction with use of Adrenaline Auto-Injector.**

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed



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## Appendix V

### Information on allergies

The most common causes of food allergies relevant to this Policy are the fourteen food allergens:

- **Cereals containing Gluten**
- **Celery**
- **Crustaceans**
- **Eggs**
- **Fish**
- **Soya**
- **Milk**
- **Nuts**
- **Peanuts**
- **Mustard**
- **Sesame Seeds**
- **Sulphur dioxide/Sulphites**
- **Lupin**
- **Molluscs**

**However, it is possible that any food has the potential to cause an allergic reaction. Contact with any food or materials containing a child's allergen has the potential to cause an allergic reaction for that child.**

Latex, chemicals, medicines, grasses, pollen, weeds, trees, pets, insect venom and animal dander (shedded flakes of skin) can also cause allergic reactions.

### Symptoms

**Mild to moderate symptoms include:**

- Swelling of the eyes, face and lips
- Runny or congested nose
- Raised itchy rash (hives), eczema flare, skin flushing
- Itchy mouth
- Stomach cramps, nausea, vomiting, diarrhoea

**Severe symptoms include:**

- Swollen tongue, hoarse voice or cry, difficulty swallowing and talking
- Chest tightness
- Breathing difficulties, persistent cough, wheeze
- Low blood pressure, feeling faint, collapse
- Pale and floppy (babies and small children)

## Appendix VI

### Other support and resources

- Allergy Guidance for Schools - https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools
- Allergy UK Helpline: providing support, advice and information for those living with allergic disease tel. weekdays 9am-5pm 01322 619898 - www.allergyuk.org
- Early Years Foundation Stage Statutory Guidance, Section 3 Safeguarding and Welfare Requirements - Food and Drink - Statutory framework for the early years foundation stage (publishing.service.gov.uk)
- Example menus for early years settings in England - Part I Guidance - Example menus for early years settings in England: part 1 (publishing.service.gov.uk) - Managing food allergies, intolerances and meeting cultural needs; Providing food allergen information; Reading food labels; Allergen information
- Food Standards Agency food allergy and intolerance online training - https://allergytraining.food.gov.uk/
- For pupils / students with Medical Conditions at School - Supporting pupils with medical conditions at school - GOV.UK (www.gov.uk)

  Wales: https://www.gov.wales/sites/default/files/publications/2018-12/supporting-learners-with-healthcare-needs.pdf

  Scotland: https://www.gov.scot/publications/supporting-children-young-people-healthcare-needs-schools/

  Northern Ireland: https://www.education-ni.gov.uk/publications/supporting-pupils-medication-needs
- FSA reporting tool for allergies - https://www.gov.uk/government/news/fsa-launches-allergy-and-intolerance-reporting-tool
- Guidance on the use of adrenaline auto-injectors in schools (Department of Health, 2017) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf

  Wales: https://www.gov.wales/sites/default/files/publications/2018-12/guidance-on-the-use-of-emergency-adrenaline-auto-injectors-in-schools-in-wales.pdf

## Appendix VII

**Chatsworth Schools – Anaphylaxis Risk Assessment**

This form should be completed by the setting in liaising with the parent and the child, if appropriate. It should be shared with everyone who has contact with the child/young person:

| | |
|---|---|
| Child/Young Person Name: | Date of Birth: |
| Setting/School:<br><br>Phase: Primary/Secondary: | Key Worker/Teacher/Tutor |
| Name and role of other professionals involved in this Risk Assessment (i.e. Specialist Nurse or School Nurse) | |
| Date of Assessment: | Reassessment due (this would usually be annually, unless there is an incident, at which point the risk assessment should be reviewed): |
| **I give permission for this to be shared with anyone who needs this information to keep the child/young person safe:**<br><br>**Signatures:**<br><br>Setting Manager/Head: Date:<br><br>Parents/Carers: Date:<br><br>Child/Young Person: Date: | |
| What is the child/young person allergic to?<br><br>Allergen exposure risks to be considered:<br><br>Ingestion ☐<br><br>Direct contact ☐ | |

| |
|---|
| Indirect contact ☐ |
| Does this child already have an Allergy Action Plan (AAP) or an Individual Healthcare Plan (IHP)?<br>Yes ☐<br>No ☐<br>Is the child prescribed adrenaline auto-injectors (AAIs)?<br>Yes ☐<br>No ☐<br>Summary of current medical evidence seen as part of the risk assessment (copies attached) |
| Key Questions – Please consider the activities below and insert any considerations that need to be put in place to enable the child to take part. |
| **Activities** |
| Crayons/painting: |
| Creative activities: i.e. craft paste/glue, pasta: |
| Science type activity: i.e. bird feeders, planting seeds, food: |
| Musical instrument sharing (cross contamination issue): |
| Cooking (food prep area and ingredients): |

| |
|---|
| Mealtime:<br><br>Kitchen prepared food (is allergy information available):<br><br>Packed lunches: |
| Snacks (is allergy information available): |
| Drinks: |
| Celebrations: e.g. Birthday, Easter: |
| Hand washing: |
| Indoor play/PE (AAIs to be with the child): |
| Outdoor play/PE (AAIs to be with the child): |
| School field (AAIs to be with the child): |
| Forest school (AAIs to be with the child): |
| Offsite trips (are staff who accompany trip trained to use AAI?): |

| **Allergy Management** |
| --- |
| Does the child know when they are having an allergic reaction? |
| What signs are there that the child is having an allergic reaction? |
| What action needs to be taken if the child has an allergic reaction? |
| If the medication is stored in one secure place are there any occasions when this will not be within 5 minutes reach if required?<br>Yes ☐<br>No ☐<br>If Yes state when and how this can be adjusted: |
| If the child is trained and confident can the medication be carried by them throughout the day?<br>Yes ☐<br>No ☐<br>If No state reason: |
| Does the child have two of their own prescribed AAIs? |
| How many staff need to be trained to meet this child's need? |

| |
|---|
| Are there any backup spare AAIs available and where are they located? |
| **Outcome of Risk Assessment**<br><br>**New Allergy Action Plan (AAP)/Individual Healthcare Plan (IHP) required?**<br><br>**YES** ☐<br>**NO** ☐<br><br>**Existing Allergy Action Plan (AAP)/Individual Healthcare Plan (IHP) to be updated?**<br><br>**YES** ☐<br>**NO** ☐ |

## Interpretation

In this policy, the term “senior manager” means the School Head and their designated deputies.

This policy applies to all employees in all Schools (save for Schools with their own procedure which shall prevail) and other work environments within Chatsworth Schools.

This policy applies within all companies, which are wholly owned subsidiaries of Chatsworth Schools Ltd, a company registered in England, registered number 11552579.

The registered office of all companies is St Botolph Building, 138 Houndsditch, London, EC3A 7AR. Any enquiries regarding the application of this policy should be addressed to the Executive Director of Property & Development at the above address.