Learning Community Trust

ALLERGY SAFETY POLICY 2026

Policy approved by	Resource Committee
Last Review	Autumn 2026
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Legal/Regulatory Requirements

This policy and its related procedures exist to ensure that LCT meets compliance with the following:

- allergy safety in schools
- supporting pupils with medical conditions at school
- using emergency adrenaline auto-injectors in schools
- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

Policy statement

The LCT aims to meet its commitments by:

- Setting out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Making clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promoting and maintaining allergy awareness among the school community.

Responsibilities

The Resource Committee is responsible for:

- approving the policy and subsequent amendments to it.
- monitoring performance and providing onward assurance to Board that this is satisfactory.

The Chief Executive Officer/Executive Team are responsible for:

- reviewing this policy and recommending appropriate amendments.
- designing and providing training for staff on the policy and its related procedures.
- issuing guidance in relation to the use and implementation of procedures.
- investigating and responding to breaches of the policy and its related procedures.
- providing assurance to Resource Committee that the policy and procedures in place remain fit for purpose.
- approving any local adaptations to this policy and its procedures at the Academy level.

The Local Governing Board (LGB) are responsible for:

- monitoring local implementation of this policy at the Academy level.
- escalating any concerns or non-compliance issues to the Trust.

The Headteachers/Principals are responsible for:

- understanding how the policy applies to their area and ensuring it is applied correctly.
- ensuring their staff are aware and understand the policy along with its related procedures.
- ensuring that staff who require training for their work have completed this.
- 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 medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances
- holding the Allergy safety lead to account to make the necessary arrangement to meet individual need
- ensuring the Allergy safety lead is able to fulfil their role in a safe and timely manner
- ensuring the policy, procedure and practice for Allergy Management is safely and effectively managed

Each Academy will have a nominated allergy safety lead *(named within the procedures below)* who are responsible for:

- Implementing this allergy safety policy
- Contributing to the review of the allergy safety policy at least annually, updating it when needed, and making sure it is published
- Promoting and maintaining allergy awareness across the 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
    - 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.

Each Academy will have at least 2 named volunteers among school staff *(named within the procedures below)* who 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
- Ensuring safety checks are recorded, reported and monitored

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 are responsible for:

- Being aware of the 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

If age-appropriate, pupils with allergies are responsible for:

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

Pupils without allergies are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Following school rules around food brought in to be shared
- Older pupils might also be expected to support their peers and staff in the case of an emergency.

Arrangements

The arrangements for this policy will be recorded within procedures which alongside this policy will be reviewed to ensure that they are kept up to date.

The Chief Executive Officer can approve amendments to the procedures such as:

- adaptations required to personalise the procedures to each Academy.
- correcting spelling and grammar mistakes.
- making consequential updates i.e. changes to names/job titles.
- making any other non-substantive changes that would not contradict this policy.

Any substantive changes to the procedures *(not required to personalise to the Academy)* or anything that requires a change to the policy itself will need to be approved by the Resource Committee first.

Review of Policy

This policy will be reviewed annually, or sooner if warranted by internal or external events or changes and any amendments proposed submitted to Resource Committee for approval.

ALLERGY SAFETY PROCEDURES

Named Responsible Individuals

For Crudgington Primary School the:

- The nominated allergy safety lead is Hannah Gharu.
- The two named volunteers among school staff:
    - Joanne Flynn-Gamble
    - Tracey Perrin

See Policy above for full details of their delegated responsibilities.

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 by either phone call to the school 01952 951403 or an email to tracey.perrin2@lct.education if their child’s medical needs change during the school year.

Identifying staff and visitors at risk

Our school’s arrangements for identifying staff and visitors with known allergies are:

- Asking new staff to provide details of their allergies in advance of their start date
- Asking visitors to provide details of their allergies in advance of their visit

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 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 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 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 risk factors for anaphylaxis
- Whether a pupil has been prescribed ADs (and if so, what type and dose)
- Where a pupil has been prescribed an AD, 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 each classroom, on the inside of the teacher's cupboard; the school kitchen and the school office, 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 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 should 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. Food must not be prepared at home and brought into school to be shared with other pupils eg home made birthday cakes

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

Insect bites/stings
When outdoors:

- Shoes should always be worn
- Food and drink should be covered

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 animals

Visits and trips
- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school 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 AD 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 AD protocols for off-site events and school trips (see section below).

Procedures for handling an allergic reaction
- As part of the whole-school awareness approach to allergies, 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 AD device will only be used if:
    - The pupil does not have a prescribed AD
    - The pupil's prescribed AD are not available or misfire

Adrenaline devices (ADs)

Prescribed ADs
Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Pupils with prescribed ADs should take them home with them at the end of each school day, and parents are responsible for ensuring that they are in date.
If a pupil cannot keep their ADs with them in the classroom (due to age or other considerations), then the devices will be stored:

- Emergency adrenaline devices (ADs) will be stored in the unlocked school office, which is accessible within five minutes from all areas of the school site.
- The location of prescribed ADs will be clearly labelled and communicated to all staff and reviewed annually or after each use.

- Prescribed ADs will be kept in the medical box in the classroom of the prescribed child and will move around the school with the child as per their risk assessment.
    - ADs will be stored at room temperature, in accordance with the manufacturer's instructions.
    - ADs will be protected from direct sunlight and extremes of temperature.
    - Staff will ensure that pupils have rapid access to their prescribed ADs at all times, including during lessons, breaktimes, lunchtimes, sports activities and extracurricular clubs.
    - When pupils are attending educational visits, residential visits or other off-site activities, their two prescribed ADs will accompany them and be readily accessible at all times.
    - Arrangements for carrying and accessing prescribed ADs during off-site activities will form part of the visit risk assessment and planning process.
    - A copy of the pupil’s allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.
    - Parents/carers are responsible for providing two in-date prescribed adrenaline devices (ADs) for their child.
    - Both prescribed ADs must be provided to the school before the child's first day of attendance.
    - The prescribed ADs will be stored in the child's classroom medical box.
    - The classroom medical box will accompany the child whenever they move around the school site to ensure rapid access to their prescribed ADs at all times.
    - Parents/carers remain responsible for ensuring that prescribed ADs are within their expiry date and for providing replacement devices when required.
    - School staff will monitor expiry dates and notify parents/carers when a replacement device is required.
    - Where a prescribed AD is taken home, parents/carers must ensure it is returned to school before the next school day.
    - A record will be maintained of all pupils who have been prescribed adrenaline devices, including:

- The pupil's name and class
- The location of their prescribed ADs
- Expiry dates of the devices
- Emergency contact details
- Confirmation that an up-to-date Allergy Action Plan has been provided
    - A copy of each pupil's Allergy Action Plan will be kept with their medical records and shared with relevant staff to ensure appropriate support in the event of an allergic emergency.

Records relating to prescribed ADs and Allergy Action Plans will be reviewed regularly and updated whenever new information is provided by parents/carers or healthcare professionals.

Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school’s spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil’s prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma reliever inhaler and ensuring they are stored according to the guidance.

The school will maintain a supply of spare adrenaline devices (ADs) for use in an emergency where appropriate and in accordance with statutory guidance.

Spare ADs will be purchased through Eeureka a registered supplier.

The school currently holds:

- Two Mylan Junior EpiPens
- Two Mylan 300 microgram EpiPens

The school has chosen to purchase and maintain EpiPen devices only, to reduce the risk of confusion and support staff confidence when administering emergency medication.

Both the Junior and 300 microgram devices are held to ensure an appropriate dose is available according to the age and needs of pupils.

Spare ADs will be stored in the school office alongside emergency medical equipment and will be easily accessible to trained staff at all times.

Spare ADs will be clearly labelled and stored separately from individually prescribed devices.

The school will maintain records of all spare ADs, including:

- The type and quantity of devices held
- Batch numbers
- Expiry dates
- Dates of purchase and replacement

The designated member of staff responsible for medical needs will carry out regular checks to ensure all spare ADs remain in date and fit for use.

Expired or damaged devices will be replaced promptly to ensure the school maintains an adequate supply at all times.

Spare ADs will be stored:

Spare adrenaline auto-injectors (AAIs) will be stored in the **school office emergency medication box**. This location is centrally situated, unlocked and accessible to authorised staff at all times, ensuring that emergency medication can be retrieved and administered within five minutes of where it may be required. The emergency medication box will be kept at room temperature, in accordance with the manufacturer's guidelines, and protected from direct sunlight and extremes of temperature to maintain the effectiveness of the medication.

Spare AAIs will be kept:

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

Joanne Flynn-Gamble and Tracey Perrin are responsible for:

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

Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions, in a sharps bin for collection by the local council.

Using spare ADs 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.

Use of ADs off school premises

For all school trips and off-site events, pupils at risk of anaphylaxis who are prescribed and able to self-administer their adrenaline auto-injectors will be encouraged to carry their own medication with them. In addition, a member of staff who has received appropriate anaphylaxis and AAI training will carry the pupil's emergency medication and the school's spare AAI throughout the visit. Emergency medication will remain readily accessible at all times and will not be stored in luggage or vehicle compartments. Staff will ensure that spare AAIs are available for immediate use in the event of an anaphylactic emergency.

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, or in the same way accidents are recorded, 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 Hannah Gharu. 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.

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

The school will conduct allergy safety drills annually. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist
- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing
- Understand the allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy and how to use an allergy or asthma action plan
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')
- Training will be accessed via National College.
- Supply staff and cover staff must confirm they have accessed allergen training through their authorising provider and must be orientated with the school's emergency planning before working with pupils.

- New staff must be provided with allergen training at induction and orientated with the school's emergency planning before working with pupils.

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.

Staff should teach pupils about allergies, including through assemblies, as part of the taught curriculum for example in Food Technology, Life Skills, Science, PSHE etc - useful resources we will use are linked here Allergy School

Wellbeing

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 incidents and 'near misses' for more detail.

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.

Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- School food policy
- Data protection policy
- Behaviour policy