Allergy Safety Policy

For all Academy School within TAMAT

This Allergy Safety Policy was approved and adopted by the Trust Board: September 2026
It will be reviewed: September 2027

TAMAT Allergy Safety Policy

1. Policy Statement

Crawley Ridge Junior School is committed to safeguarding pupils with allergies and reducing the risk of allergic reactions, including anaphylaxis. Our aim is to keep all children with allergies safe while ensuring they can take part fully in school life.

This policy sets out our whole-school approach to:

- Preventing exposure to allergens
- Recognising allergic reactions
- Responding effectively in emergencies
- Supporting pupils to participate fully in school life

This policy should be read alongside:

- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Health & Safety Policy

2. Legal Framework

This policy is based on:

- Children and Families Act 2014
- DfE Statutory Guidance (2026): *Supporting Children and Young People with Medical Conditions and Allergies*
- National allergy safety requirements (September 2026)

3. Roles and Responsibilities

Governing Body

- Ensure this policy is implemented and reviewed annually
- Monitor compliance, training, and incident reporting

Headteacher

- Overall responsibility for policy implementation
- Ensure adequate staffing, training, and resources

Designated Allergy Lead

Named lead: Sam Hadlington

Oversees allergy management across the school

- Maintains allergy records and coordinates training

All Staff

- Attend allergy and anaphylaxis training (refer to Appendix A for specific training)
- Understand pupils' needs and follow Individual Healthcare Plans
- Respond appropriately in emergencies

4. Identification of Pupils with Allergies

The school will:

- Maintain an up-to-date allergy register including staff and visitors , their known allergens and whether they carry any medication
- Ensure all pupils with allergies have:
    - Medical information recorded
    - An Individual Healthcare Plan (IHP)
- Share essential information with relevant staff
- Share allergy information forms with parents on induction

5. Individual Healthcare Plans (IHPs)

Each plan will include:

- Known allergens
- Signs and symptoms
- Medication required
- Emergency response procedures
- Named trained staff
- Any attachments to plans created by healthcare professionals

Plans are:

- Created with parents and use guidance from healthcare professionals
- Reviewed at least annually or sooner if needs change
- Used as the child's IHP if the allergy is their only medical need

6. Reducing Risk and Prevention

General Measures

- Clear communication with staff, parents, and pupils
- Agreed avoidance strategies for each child
- Supervision during meals and activities when required

Food Management

- Allergen awareness in school meals and packed lunches
- Clear labelling of food where relevant
- Risk assessments for cooking or food-based activities

Environment

- Cleaning protocols to reduce contamination
- Controls for classroom materials (e.g., food-based resources)

Visits and Trips

- Risk assessments must include allergy controls
- Medication must be accessible at all times

Staff will:

- Ensure all visits and trips are planned inclusively so that children and young people with allergies can participate safely, with appropriate adjustments made where needed.

- Guarantee access to adrenaline devices at all times during visits and trips, ensuring prescribed AAIs travel with the child and remain immediately accessible.

- Conduct individual risk assessments for any child or young person at risk of anaphylaxis before any off-site activity, identifying specific controls required to keep them safe.

- Ensure pupils carry their own prescribed AAI during trips and external activities, unless their Individual Healthcare Plan specifies an alternative arrangement.

- Provide trained staff on every trip who are competent to recognise anaphylaxis and administer adrenaline in an emergency.

- Review and record all allergy-related trip planning to ensure risk assessments, adjustments, and emergency arrangements are documented and monitored.

7. Food Allergy

The school will implement clear, proactive measures to minimise the risk of any individual, pupils, staff or visitors coming into contact with their known allergens. This includes-

- robust controls for food provided by the school, with catering teams following strict allergen management procedures, accurate labelling, and safe food handling practices to prevent cross-contamination.
- The school will also manage risks from food brought in by others, such as packed lunches, birthday treats or staff snacks, through clear communication with families and staff, agreed avoidance strategies, and supervision where required.
- For pupils with airborne or contact allergies, reasonable environmental measures will be put in place, including cleaning protocols, controls on classroom materials, and adaptations to activities where necessary.
- Staff planning any activity such as craft activities, science experiments, music sessions, cooking, or work involving animals must consider allergen exposure risks and take steps to reduce them.

- When organising external visits or trips, the school will complete specific risk assessments for pupils with allergies to ensure their medication is accessible at all times and that appropriate controls are in place to keep them safe.

7. Medication & Adrenaline Auto-Injectors (AAIs)

The school will:

- Ensure prescribed medication is readily accessible
- Store medication safely but not locked away if needed urgently
- Maintain a record of expiry dates
- The school will have clear arrangements to ensure that children, young people and parents can take individually prescribed adrenaline devices home at the end of the day, including for the journey home
- A secure record will be maintained of all pupils who have been provided with prescribed adrenaline devices and an accompanying Allergy Action Plan, ensuring that staff know which pupils require emergency medication and that expiry dates, replacements and updates are monitored consistently

Two AAIs in School

Children with allergies should have two in-date AAIs in school at all times so a second dose can be given after 5 minutes if needed.

We ensure that no child is more than five minutes away from their adrenaline device.

Spare AAIs

The school will:

- Hold spare AAIs for emergency use
- Spare adrenaline devices are stored in pairs, so that if a second one is necessary it is on hand
- Ensure they are clearly located and accessible
- Maintain a register and regular checks
- Hold spare adrenaline auto-injectors in line with statutory guidance**,** ensuring they are stored in clearly identified, accessible locations.
- Check spare AAIs regularly **to** confirm they remain in date and in good working condition, keeping an accurate log of all checks.
- Use spare AAIs only in permitted circumstances**,** including when a pupil's prescribed device is unavailable, cannot be located, is out of date, fails to activate, or when a child experiences a first-time anaphylactic reaction.
- Ensure trained staff administer spare AAIs immediately**,** following the individual's Allergy Action Plan where available and calling emergency services without delay.
- Maintain detailed records of all spare AAI expiry checks, usage, and any incidents, and review these to ensure safe practice and continuous improvement.

8. Staff Training

All staff receive annual training on:

- Recognising allergic reactions
- Using AAIs
- Emergency procedures
- Allergen awareness and prevention

New and temporary staff are trained on induction.

9. Emergency Procedures (Anaphylaxis)

Signs of Anaphylaxis

Staff are trained to recognise:

- Difficulty breathing
- Swelling of lips, face, or throat
- Collapse or unconsciousness

Emergency Response

Staff will:

1. Lie the child flat (or sit up if breathing is difficult)
2. Administer the AAI immediately
3. Call 999 and state "anaphylaxis"
4. Give a second AAI after 5 minutes if symptoms do not improve
5. Stay with the child until medical help arrives
6. Inform parents/carers
7. Record the incident

10. Communication and Awareness

The school will:

- Inform staff of pupils with allergies and share their IHP with all appropriate staff
- Provide age-appropriate education to pupils
- Communicate regularly with parents
- Display emergency procedures where appropriate

11. Bullying & Emotional Wellbeing

- Allergy-related bullying is treated seriously under the Behaviour Policy
- We promote understanding and inclusion through assemblies, PSHE, and staff training
- Children are supported to feel confident and safe

12. Trips, Sports & Extra-Curricular Activities

- Children with allergies are included in all activities with appropriate planning
- AAIs must accompany the child at all times

- At least one trained member of staff attends every trip
- Risk assessments are completed for all off-site activities

13. Record Keeping and Incident Reporting

The school will:

- Record all allergy incidents and near misses
- Review incidents to identify improvements
- Report serious cases in line with safeguarding and health & safety requirements

14. Policy Review

This policy will be:

- Reviewed annually
- Updated following incidents or changes in guidance

Refer to Appendix A for specific training requirements.

Next review date: Autumn 2027

Appendix A

Allergy Training

1. Whole-school allergy awareness training

All staff (teaching, support, lunchtime, office, site team) must receive training covering:

- Understanding allergies – what allergies are, common triggers, and how they present in children.
- Recognising symptoms – early signs of allergic reactions and anaphylaxis.
- Preventative practice – safe food handling, avoiding cross-contamination, managing snacks, birthday treats, and curriculum activities.
- Individual healthcare plans – knowing which pupils have allergies and what their personalised plan requires.

2. **Emergency anaphylaxis response training**

This is a **legal requirement** for all staff.

Training must include:

- How to administer an adrenaline auto-injector (EpiPen, Jext, Emerade).
- Correct positioning of the child during a reaction.
- Calling emergency services and communicating clearly.
- Follow-up actions after administering adrenaline.
- Use of spare AAIs (schools must hold spares under Benedict's Law).

3. Training on the school's allergy policy and procedures

Staff must be trained on:

- **The school's allergy policy** (required under Benedict's Law).
- Roles and responsibilities during the school day, trips, clubs and lunchtime.
- How to **record, report and escalate** allergy incidents.
- Safe supervision of pupils with allergies.

4. Food handling and catering staff training

Catering teams must receive **enhanced training**, including:

- Food allergen management.
- Preventing cross-contamination.
- Accurate allergen labelling and communication with school staff.
- Procedures for pupils with severe allergies.

5. Regular refreshers and scenario-based practice

Benedict's Law requires training to be regularly updated, not a one-off.

This includes:

- Annual refreshers.
- Scenario drills (e.g., lunchtime reaction, classroom reaction, playground reaction).
- Updates when a pupil's allergy changes or new pupils join.

6. Training for new staff and supply staff

Schools must ensure:

- Induction training includes allergy awareness and emergency response.
- Supply staff are briefed on pupils with allergies and emergency procedures.

Summary

Under Benedict's Law, schools must ensure **every adult** knows:

- How to **prevent** allergic reactions.
- How to **recognise** symptoms quickly.
- How to **respond** immediately and safely, including administering adrenaline.
- How to follow the school's **allergy policy and procedures**.

This is now a **statutory safeguarding requirement**.