EQUA Mead
Learning Trust
Every Child, Every Chance

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| **Policy name** | **Allergy Safety Policy** |
| **Policy Lead** | **CFO** |
| **Adopted by Trust Board** | **October 2026** |
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## 1. Policy Statement

EQUA Mead Learning Trust is committed to providing a safe, inclusive and welcoming environment for all pupils, staff, volunteers and visitors with allergies.

We recognise that allergic reactions, including anaphylaxis, can be serious and life-threatening. Through effective risk management, staff training, clear communication and robust emergency procedures, we aim to minimise the risk of exposure to allergens whilst ensuring that individuals with allergies can participate fully in all aspects of school life.

This policy is informed by the Department for Education's Allergy Safety in Schools statutory guidance and applies to all Trust schools. Hard copies are available on request.

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## 2. Objectives

This policy aims to:

- Promote a whole-school approach to allergy awareness.
- Minimise the risk of exposure to known allergens.
- Ensure staff can recognise and respond effectively to allergic reactions.
- Support the inclusion, safety and wellbeing of individuals with allergies.
- Ensure appropriate storage, accessibility and administration of medication.
- Meet statutory duties relating to safeguarding, health and safety, equality and medical conditions.

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## 3. Roles and Responsibilities

### Trust Board

The Trust Board are responsible for:

- Ensuring implementation of this policy.
- Monitoring allergy safety arrangements.
- Reviewing incidents, trends and lessons learned.
- Ensuring adequate resources, training and emergency medication are available.
- Annual review of allergy incidents
- Assurance of policy compliance across schools
- Monitoring training completion rates
- Review of serious incidents and themes

### Headteacher

The Headteacher is responsible for ensuring:

- Effective implementation of this policy.
- Appropriate staffing, training and monitoring arrangements.
- Compliance with statutory requirements.
- Appropriate reporting of incidents.

**Allergy Lead**

Each school will identify a member of the leadership team to act as Allergy Lead.

The Allergy Lead will:

- Maintain allergy registers.
- Oversee Individual Healthcare Plans (IHPs).
- Ensure information is shared appropriately with relevant staff.
- Coordinate staff training including refresher training
- Monitor emergency medication and expiry dates ensuring replacements are secured one month prior to expiry.
- Record and review incidents and near misses.
- Liaise with families, healthcare professionals and catering providers.
- Maintain training record and attendance logs
- Maintain competency records where applicable

**All Staff**

All staff are responsible for:

- Understanding and following this policy.
- Supporting implementation of IHPs.
- Recognising signs of allergic reactions.
- Acting immediately in an emergency.
- Reporting incidents and near misses.
- Taking reasonable steps to reduce exposure to allergens.

**Parents and Carers**

Parents and carers are responsible for:

- Providing accurate and up-to-date medical information.
- Informing school of any changes to allergy management.
- Providing prescribed medication where required.
- Ensuring medication is in date.

## 4. Identification and Information Sharing

Schools will set out arrangements for identifying individuals with allergy (C&YP, staff and visitors), their known allergens and whether they carry medication. They will maintain an up-to-date register.

Relevant information will be shared securely with those who need it to fulfil their responsibilities, including:

- Teaching staff
- Support staff
- Catering teams
- Trip leaders
- Temporary and supply staff

Supply staff and temporary workers will receive allergy and emergency procedure information before assuming responsibility for pupils.

Information sharing will comply with UK GDPR and safeguarding requirements.

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## 5. Individual Healthcare Plans

An IHP will be developed for any pupil whose allergy requires specific management arrangements whilst in school. This includes:

- Pupils with prescribed adrenaline devices.
- Pupils with allergy action plans.
- Pupils whose allergies require specific arrangements beyond normal school practice.

IHPs will:

- Be developed with parents/carers and, where appropriate, the pupil.
- Include control measures and emergency procedures.
- Reference any allergy action plan and asthma plan.
- Be reviewed annually and following any incident, near miss or significant change.

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## 6. Risk Reduction and Prevention

The Trust adopts an allergy-aware approach.

Schools will complete and regularly review risk assessments to reduce the likelihood of exposure to allergens.

Risk assessments will consider:

- Classroom activities.
- Food technology and practical lessons.
- School catering.
- Visits and trips.
- Wraparound provision.
- Visitors and volunteers.
- Airborne and contact allergens.
- Non-food allergens including latex and animals.

Blanket food bans will not normally be used unless supported by a specific risk assessment and medical advice.

Schools will promote:

- Good hygiene practices.
- Handwashing before and after eating.
- Cleaning of eating areas.
- Awareness of food sharing risks.
- Respectful and inclusive behaviour towards individuals with allergies.

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**7. Food Provision and Catering**

Where food is provided by the school:

- Food allergen information will be available.
- Catering providers will comply with food allergen regulations.
- Appropriate systems will identify pupils with allergies at point of service.
- Food used within curriculum activities will be appropriately labelled.
- Procedures will minimise cross-contamination risks.

All food brought into school including packed lunches, celebrations, events and by staff must comply with school procedures and be considered alongside the needs of pupils with allergies.

Third-party providers operating on school premises will be expected to follow equivalent standards.

These procedures apply to school led breakfast and after school provision.

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**8. Medication and Adrenaline Devices**

Pupils prescribed adrenaline devices should have immediate access to them throughout the school day, including educational visits and extracurricular activities.

Medication must:

- Be stored safely and in pairs
- Be easily accessible.
- Remain in date.
- Be protected from extreme temperatures.

Each school will maintain spare adrenaline devices in accordance with statutory guidance. These will be clearly labeled or kept in a marked ‘emergency anaphylaxis kit’ to avoid confusion with prescribed devices.

Schools will ensure that no child or young person is more than five minutes from adrenaline devices.

Schools will maintain records of:

- Written parental consent for the use of spare AAIs.
- The location of spare AAIs.
- Expiry date checks and replacement arrangements.
- Administration of prescribed and spare AAIs.
- Post-incident reviews and actions taken.

In an emergency, any member of staff may administer an AAI where they believe a pupil is experiencing anaphylaxis. The safety and welfare of the pupil will take precedence over any delay in treatment. Staff are expected to follow the pupil's Individual Healthcare Plan and emergency procedures wherever possible.

Following the administration of a prescribed or spare AAI, the school will:

- Call 999 immediately and request an ambulance, stating that anaphylaxis is suspected.
- Inform parents/carers as soon as reasonably practicable.
- Record the incident as soon as possible, including the name of the pupil, date, time, symptoms observed, location, medication administered, staff involved, and outcome.
- Replenish any spare medication used.
- Review the incident to identify any lessons learned and update relevant risk assessments, healthcare plans or control measures where necessary.

**Use of Spare Adrenaline Auto-Injectors (AAIs)**

Schools will obtain written parental consent for the emergency use of a spare adrenaline auto-injector (AAI) for pupils with a diagnosed allergy who are at risk of anaphylaxis, in line with statutory guidance and local procedures. Consent arrangements will be reviewed annually and whenever a pupil's medical needs change.

A spare AAI may be administered when:

- A pupil is displaying symptoms consistent with anaphylaxis and requires immediate treatment.
- Their prescribed AAI is unavailable, inaccessible, expired, has already been administered, or is otherwise unsuitable for use.
- A member of staff reasonably believes that immediate administration of an AAI is required to minimise harm.

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## 9. Recognising Allergic Reactions

Mild to Moderate Reactions

Symptoms may include:

- Itching or tingling.
- Hives or rash.
- Swelling of lips, eyes or face.
- Stomach pain or vomiting.
- Mild throat discomfort.
- Sudden behavioural change.

Anaphylaxis

Symptoms may include:

**Airway**

- Swelling of the tongue or throat.
- Difficulty swallowing.
- Hoarse voice.

**Breathing**

- Persistent cough.
- Wheeze.
- Breathing difficulties.

**Circulation**

- Dizziness.
- Collapse.
- Pale or clammy skin.
- Loss of consciousness.

Any suspected anaphylaxis must be treated as a medical emergency.

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## 10. Emergency Response

If anaphylaxis is suspected:

1. Stay with the individual and call for help.
2. Administer adrenaline immediately.
3. Note the time medication is given.
4. Call 999 and state "anaphylaxis".
5. Keep the individual lying flat with legs raised wherever possible.
6. Administer a second dose after five minutes if symptoms persist.
7. Contact parents/carers as soon as practicable.
8. Ensure the individual is taken to hospital for assessment.

If there is doubt whether symptoms are caused by asthma or anaphylaxis, adrenaline should be administered first.

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## 11. Training and Awareness

All staff will receive annual allergy awareness training.

Training will cover:

- Allergy awareness.
- Signs and symptoms of allergic reactions.
- Recognition of anaphylaxis.
- Emergency procedures.
- Use of adrenaline devices.
- Individual Healthcare Plans.
- Incident and near miss reporting.
- Inclusive practice and wellbeing.
- Medical distinctions ensuring understanding of the difference between food allergy, coeliac disease and food intolerance.
- Allergy triggers

All new employees, temporary staff, supply staff and volunteers will receive appropriate information before undertaking duties and as a key part of induction.

Schools will periodically rehearse emergency procedures.

Volunteers will receive allergy awareness training.

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## 12. School Trips, Visits and Extra-Curricular Activities

Pupils with allergies will be fully included in educational visits and extracurricular activities.

Risk assessments will consider:

- Allergen exposure.

- Emergency medication.
- Transport arrangements.
- Access to emergency medical support.
- Food provision.

Trip leaders must ensure required medication accompanies the pupil throughout the visit.

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**13. Incidents and Near Misses**

All allergic reactions and near misses must be recorded and reviewed.

Schools will:

- Investigate incidents proportionately.
- Identify lessons learned.
- Update risk assessments and IHPs where necessary.
- Share outcomes with relevant families and staff.

The Trust promotes a learning culture focused on improving safety rather than blame.

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**14. Wellbeing and Inclusion**

The Trust recognises that allergies can affect confidence, wellbeing and participation.

Schools will:

- Promote allergy awareness.
- Prevent bullying related to allergies.
- Ensure pupils can participate safely in all areas of school life.
- Consider the emotional impact of allergy management on pupils and families.
- Schools will make reasonable adjustments for pupils whose allergies constitute a disability under the Equality Act 2010."

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**15. Safeguarding**

Where concerns arise that a child's health needs are not being met, including repeated absence of essential medication or failure to share relevant medical information, safeguarding procedures will be followed.

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## 16. Unacceptable Practice

Schools will not:

- Restrict access to prescribed medication.
- Require parents to attend school routinely to administer medication.
- Exclude pupils from activities because of allergies without clear risk assessment.
- Ignore medical advice.
- Assume all allergies require the same response.
- Send an unwell pupil unaccompanied to seek help during an emergency.
- Penalise attendance linked to medical appointments or health needs.

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## 17. Monitoring and Review

This policy will be:

- Published on the Trust and school websites.
- Reviewed annually.
- Reviewed following significant incidents, near misses or changes to statutory guidance.

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