The 3-18 Education Trust
Much Wenlock Primary School and Nursery
Allergy Safety Policy

'Every individual is in a great school.'

Approved: Autumn Term 2026
Review: Autumn Term 2027

Our Mission

Rooted in Equity. Belonging by Design. Success Without Limits.

Our Values

Compassionate
To show care and understanding towards others.

Accomplished
To provide high quality education and training for all.

Resilient
To be solution focused and able to intelligently manage challenges.

The 3-18 Education Trust
101 Longden Road
Shrewsbury
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Company Number: 08064698

Policy Monitoring and Review

Monitoring

The Chief Executive Officer will monitor the outcomes and impact of this policy on an annual basis.

Review

Member of Staff Responsible	Chief Executive Officer
Relevant Guidance/Advice/Legal Reference	The Key
Policy Adopted By	Board of Directors
Date of Policy	Autumn Term 2026
Review Period	Annually
Date of Next Review	Autumn Term 2027

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1. Aims

This policy aims to:

- Set out the 3-18 Education Trust's (Trust) approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our Trust supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

3.1 The Trust Board

The Trust Board is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed
- The Trust has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis

The Trust Board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy safety lead

The nominated allergy safety lead in the school is Emma Nicholas, Head of School.
They're responsible for:

- Implementing this allergy safety policy
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published
- Promoting and maintaining allergy awareness across our 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

3.3 Headteacher

Each School Headteacher is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances

3.4 Nominated Leads

Steph Boxall (Office Manager) and Karen Hart (TA) 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

3.5 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.7 Pupils with allergies

If age-appropriate, these pupils 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

3.8 Pupils without allergies

These pupils are responsible for:

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

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

4. 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

4.1 Identifying pupils at risk

The school maintains a register of pupils with known allergies to ensure appropriate support and risk management arrangements are in place. Information regarding a pupil's allergy is obtained from parents/carers during the admissions process and updated whenever there is a change in the pupil's medical needs.

Parents/carers are responsible for informing the school of any known allergies and providing relevant medical information, including details of symptoms, triggers, prescribed medication and emergency treatment plans where appropriate.

Details of pupils with allergies are recorded in line with the school's policy for supporting pupils with medical conditions. Relevant information is shared with staff on a need-to-know basis to ensure the safety and wellbeing of the pupil, including teaching staff, support staff, lunchtime supervisors and those responsible for educational visits.

The school will review allergy information regularly and at least annually. Parents/carers will be asked to confirm that medical information remains accurate and up to date. Any new diagnosis or change in a pupil's condition should be reported to the school as soon as possible.

Where a pupil is identified as being at risk of an allergic reaction, an Individual Healthcare Plan (IHP) will be developed where appropriate, in accordance with the school's policy for supporting pupils with medical conditions. This will outline the measures required to minimise risk and the actions to be taken in an emergency.

We will:

- For new starters, send a form to parents/carers after a place at the school has been confirmed, but before the pupil starts school, to identify any allergies and whether the pupil carries any prescribed medication. Where a pupil receives a new allergy diagnosis or joins the school mid-year, we will request this information and put appropriate arrangements in place within two weeks.

- Send a reminder to parents/carers at the start of each academic year asking them to review and update their child's medical information, including details of any allergies, medications and emergency treatment requirements.
- Maintain accurate and up-to-date records of pupils with allergies and ensure that relevant staff are informed of any changes to a pupil's medical needs.
- Review allergy information and associated risk assessments whenever new information is received or following any allergy-related incident at school.

We ask that parents/carers proactively inform us by either phone call to the school on 01952 727 634 or an email to info@wps.318education.co.uk if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

The school recognises that staff, contractors, volunteers and visitors may also have allergies that could place them at risk of an allergic reaction whilst on the premises. Reasonable steps will be taken to identify individuals with known allergies and, where necessary, to put appropriate measures in place to minimise risk.

Staff are encouraged to inform the school of any allergies or medical conditions that may require support in the workplace. Information will be handled sensitively and shared only with those who need to know in order to ensure the individual's safety.
Where appropriate, individual risk assessments or workplace adjustments will be considered in consultation with the member of staff.

Visitors attending the school on a regular basis or for specific events are encouraged to notify the school in advance of any significant allergies that may affect their visit. Where the school is made aware of a serious allergy, reasonable steps will be taken to reduce the risk of exposure to known allergens during the visit.

We will:

- Ask new members of staff to provide details of any allergies and any required emergency medication before their start date.
- Encourage existing staff to notify the school promptly of any new allergy diagnosis or changes to their medical needs.
- Request information about significant allergies from regular visitors, volunteers and contractors where appropriate before they attend the school.
- Ensure that relevant staff are aware of any agreed control measures or emergency procedures required to support staff or visitors with known allergies.
- Review risk assessments and control measures whenever new information is received or following any allergy-related incident.

4.3 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
- 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 school's 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 school's 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.

4.4 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.

4.5 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.

The register is kept in the school kitchen, staff room and EYFS kitchen, where it can be accessed quickly by staff involved in food preparation, serving or supervision. It can be checked promptly by any member of staff as part of initiating an emergency response to an allergic reaction.

Allergy information is reviewed regularly and updated whenever the school is notified of a change in a pupil's medical needs. Information is shared on a need-to-know basis to ensure the safety and wellbeing of pupils while maintaining appropriate confidentiality.

5. 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.

6. Minimising Risk

6.1 Hygiene Procedures

The school recognises that good hygiene practices are essential in reducing the risk of allergic reactions and cross-contamination.

We will:

- Remind pupils to wash their hands before and after eating.
- Expect staff to model and reinforce good hand hygiene practices.
- Not permit the sharing of food, drinks, food containers, lunch boxes, cups, cutlery or eating utensils.
- Ensure pupils have their own named water bottles.
- Clearly label lunch boxes and food provided for pupils with allergies where necessary.
- Seek parental consent and provide advance notice where food not directly provided by the school is to be consumed as part of lessons, celebrations or special events.
- Clean tables and eating areas before and after meals and snacks.
- Encourage staff and pupils to report any concerns regarding allergens or food safety immediately.

6.2 Catering

The school is committed to providing safe food options that meet the dietary needs of pupils with allergies through its catering provider.

We will:

- Ensure catering staff receive appropriate training in food allergies, allergen management and cross-contamination prevention.
- Work closely with catering staff to identify pupils with food allergies and ensure appropriate arrangements are in place.
- Engage with the catering provider to understand and monitor the controls in place to manage allergens safely.
- Make school menus available for parents/carers to view and provide allergen information on request.

- Ensure catering staff are available to discuss allergy-safe meal options with parents/carers where appropriate.
- Ensure any changes to school menus continue to meet the dietary requirements of pupils with allergies.
- Ensure allergen information relating to the 14 major allergens is provided in accordance with current food safety legislation.
- Require staff involved in preparing or serving food to understand how to check ingredient labels and identify allergens.
- Follow appropriate hygiene procedures during food preparation, storage and serving to minimise the risk of cross-contamination.
- Ensure allergy information is readily available in the school kitchen, staff room and EYFS kitchen.

6.3 Insect Bites and Stings

The school recognises that insect bites and stings can trigger serious allergic reactions in some individuals.

We will:

- Take reasonable steps to minimise exposure to insects during outdoor activities.
- Encourage pupils to wear appropriate footwear when outdoors.
- Ensure food and drinks are covered where possible during outdoor events.
- Promptly remove food waste and ensure bins are covered.
- Supervise pupils appropriately during outdoor learning, visits and recreational activities.
- Ensure staff are aware of pupils who are at risk of severe allergic reactions to insect bites or stings and know how to respond in an emergency.
- Ensure emergency medication is available in line with a pupil's Individual Healthcare Plan (IHP).

6.4 Animals

The school recognises that some pupils and staff may have allergies to animals.

We will:

- Carry out a risk assessment before animals are brought onto the school site or involved in educational activities.
- Inform parents/carers where regular contact with animals forms part of a planned activity.
- Ensure all pupils wash their hands thoroughly after handling or interacting with animals.
- Put reasonable adjustments in place for pupils with known animal allergies.
- Avoid direct contact between pupils with known animal allergies and animals where necessary.
- Clean areas used by animals appropriately following activities.

6.5 Visits and Trips

No pupil with an allergy will be excluded from participating in educational visits, residential visits or other school trips solely because of their allergy.

We will:

- Plan visits and trips to ensure the needs of pupils with allergies are appropriately considered.

- Ensure staff attending visits are aware of pupils' allergies and understand the emergency procedures that may be required.
- Carry out an individual risk assessment for any pupil at risk of anaphylaxis.
- Ensure pupils prescribed adrenaline auto-injectors carry them where appropriate, or that they are immediately accessible at all times.
- Ensure a sufficient number of trained staff are present to administer adrenaline in an emergency.
- Obtain allergen information from venues, activity providers and catering facilities where appropriate.
- Ensure emergency contact information, Individual Healthcare Plans and prescribed medication are taken on all visits.
- Follow the school's adrenaline auto-injector and emergency response procedures during all off-site activities.
- Review arrangements for pupils with allergies before departure and ensure all control measures are understood by staff involved in the visit.

7. Procedures for handling an allergic reaction

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

8.1 Prescribed Adrenaline Devices (ADs)

Pupils who are prescribed adrenaline devices (ADs) are encouraged to keep them near or on their person at all times, including when travelling to and from school and when participating in off-site visits or educational activities. It is recommended that pupils have access to two devices at all times.
Where, due to age or other considerations, a pupil is unable to carry their ADs themselves, the devices will be stored in the school’s front office. This location is:

- Unlocked and accessible to staff at all times during the school day.
- Centrally located and no more than five minutes away from any area of the school site where the device may be needed.
- Maintained at room temperature and protected from direct sunlight and extremes of temperature, in line with manufacturer guidance.

Staff are informed of the location of pupils' prescribed ADs and will ensure that devices accompany pupils on educational visits, sporting activities and any off-site events.
A copy of each pupil's allergy action plan is kept alongside their medication to provide clear instructions on recognising symptoms and administering the device in an emergency.
Parents/carers are responsible for ensuring that prescribed ADs are in date and for replacing them before their expiry date. Pupils who carry their own devices should take them home at the end of each school day so they are available for the journey to and from school.

The school will:

- Maintain an up-to-date register of pupils prescribed adrenaline devices.
- Keep a record of each pupil's allergy action plan and emergency contact details.

- Monitor expiry dates of medication held in school and notify parents/carers when replacements are required.
- Ensure relevant staff know which pupils have prescribed ADs and where their medication is stored.
- Review records regularly and update them whenever a pupil's medical needs change.

8.2 Spare ADs and inhalers

The school follows Department of Health and Social Care guidance regarding the use of spare adrenaline auto-injectors (AAIs) in schools.

The Allergy Safety Lead is responsible for ensuring that sufficient spare AAIs are available, appropriately stored and maintained in accordance with current guidance.

The school's spare AAIs are supplied through Kitt Medical as part of its medical provision package. Kitt Medical automatically provides replacement devices as required to ensure the school maintains an adequate supply of in-date AAIs throughout the academic year.

Spare AAIs are stored in the front office. This location is:

- Accessible to staff at all times during the school day.
- Centrally located and no more than five minutes from any area of the school site.
- Kept at room temperature and protected from direct sunlight and extremes of temperature in accordance with manufacturer guidance.
- Clearly identified as emergency medication storage.

Spare AAIs will be:

- Stored in pairs in case a second dose is required.
- Kept separately from pupils' prescribed medication.
- Clearly labelled as school emergency medication to avoid confusion.

The school maintains a register of pupils prescribed adrenaline devices, together with their allergy action plans and emergency contact details.

For pupils prescribed inhalers, inhalers are kept in clearly labelled red inhaler bags. These bags accompany the child or class during breaktimes, lunchtimes, PE lessons, educational visits and other activities away from the classroom. During teaching time, inhalers are kept readily accessible within the classroom to ensure rapid access if required.

A copy of each pupil's allergy action plan is kept alongside their prescribed medication to provide clear instructions on recognising symptoms and administering medication in an emergency.

Parents/carers are responsible for ensuring that prescribed medication remains in date and for providing replacement medication when required. The school will notify parents/carers when medication held in school is approaching its expiry date.

The Allergy Safety Lead and School Office Team are responsible for:

- Checking monthly that spare AAIs are present, appropriately stored and in date.
- Liaising with Kitt Medical regarding replacement devices where required.
- Maintaining records of expiry dates and replacement schedules.
- Ensuring all relevant staff know the location of emergency medication.
- Maintaining an up-to-date register of pupils prescribed adrenaline devices and their allergy action plans.
- Reviewing emergency medication arrangements annually and whenever guidance changes.

8.3 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

8.4 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.

8.5 Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their prescribed ADs with them on school trips and off-site events.

Where a pupil does not carry their own medication, a designated member of staff will be responsible for ensuring the pupil's prescribed ADs, allergy action plan and emergency contact information accompany them throughout the visit.

In addition to pupils' prescribed medication, a spare AAI from the school's emergency supply will be taken on all off-site activities and educational visits where a pupil with a diagnosed allergy is attending. The visit leader will be responsible for ensuring that the spare AAI is collected from the front office before departure and returned immediately on return to school.

The visit risk assessment will identify:

- Any pupils with diagnosed allergies.
- The location of prescribed and spare AAIs throughout the visit.
- Staff trained to recognise anaphylaxis and administer adrenaline.
- Emergency communication and medical arrangements.
- Any additional control measures required by the venue or activity provider.

Where visits involve food provision, staff will seek allergen information in advance and make appropriate arrangements to minimise risk.

All staff accompanying the visit will be informed of pupils with allergies and the procedures to follow in the event of an allergic reaction. At least one member of staff trained in the administration of adrenaline will be present on visits where a pupil at risk of anaphylaxis is attending.

9. 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.

9.1 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 online system, 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.

9.2 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. In the case of a pupil aged 16 and over, the school will confirm that the pupil agrees that their parents/carers should be informed.

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 Emma Nicholas, Head of School and Rachel Howell-James, Executive Headteacher. The allergy safety lead, Emma Nicholas, will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil’s IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff.

To the local authority: any allergen-related food safety incidents.

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.

10. Allergy awareness

10.1 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 and Jext so staff can practice 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 school's 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')

10.2 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. Schools will endeavour to teach pupils about allergies to improve everyone's understanding.

11. Wellbeing

The school is conscious that pupils with allergies may be unfairly stigmatised, which may have an impact on mental health. 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 behavior policy.

11.1 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 9 of the policy for more detail on incidents and 'near misses'.

12. 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.

13. Monitoring arrangements

This policy will be monitored by the allergy safety lead.
It will be reviewed and approved annually by the allergy safety lead, or more frequently if a serious incident or ‘near miss’ identifies an area for improvement.

14. Links to other policies

This policy links to the following policies and procedures:
Health and safety policy
Supporting pupils with medical conditions policy
Data protection policy
Behavior policy