

Swalecliffe Community Primary School

Allergy Safety Policy

Version: 1.0 2024

Date Adopted: September 2026

Date of review: September 2027

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Aims

This policy aims to:

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

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

Roles and responsibilities

The Governing Board

The governing board is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed
- The school 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 governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

Allergy Safety Lead

The nominated allergy safety lead is the Deputy Headteacher

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

Executive Headteacher

The Executive Headteacher has devolved to the Head of School/Allergy Safety Lead the 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.

Allergy Safety Officer and SEND Administrator

Are responsible for:

- Checking spare adrenaline auto-injectors *(*AAI)s are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach
- Updating the Register of Allergy Incidents, including near misses.

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
    - Ensuring any AD devices for a pupil are available in class, and taken out of the classroom with the pupil when necessary (e.g. forest school, PE, playtime, lunchtime etc)
    - Reporting any allergic reaction or case of anaphylaxis to the Allergy Safety Lead (Deputy Headteacher)

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 pupil's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis

- If required, providing their pupil 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 or as gifts
- Updating the school on any changes to their pupil's condition

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 / or knowing where it can be found if required – depending on the details of the IHCP / and/or returning it to the designated place in the classroom.
- Understanding how and when to use their AD

Pupils without allergies

These pupils are responsible for:

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

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

Identifying individuals at risk

Allergies are 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 mold
- 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 (Appendix A), alongside the information parents enter on Arbor, 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 all parents/carers at the start of each year asking them to update their pupil's medical information as necessary (for example, via Arbor)

We ask that parents/carers proactively inform us by either phone call to the school office or email the school office on office@swalevliffe.kent.sch.uk for the attention of Mrs Roy- allergies if their pupil's medical needs change during the school year.

Identifying staff and visitors at risk

We will:

- Ask new staff to provide details of their allergies in advance of their start date, see Appendix B
- Ask visitors to provide details of their allergies in advance of their visit, see Appendix C

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 pupil 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 pupils 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 Inclusion Lead/Allergy Safety Lead and SEND administrator are 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 in determining who will need an IHP:

- Does the pupil have an allergy which has a functional impact on them in the school environment?
- Are they at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally?

  If the answer is yes, then an IHP will be put in place.

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. IHP's will be recorded on CPOMs.

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's SEND Administrator will keep an up-to-date register of all known allergens for all members of the school community that will be reviewed annually or as required. (This will link to your 'supporting pupils with medical conditions' policy)

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 TEAMS) and can be checked quickly by any member of staff as part of initiating an emergency response.

All children with a IHCP that demonstrates possible risk of Anaphylaxis will also have their names/photographs/allergens and IHCP on display in the staffroom

Allowing all pupils to keep their ADs with them will reduce delays and allows for confirmation of consent without the need to check the register.

Each pupil will be assessed (in consultation with the parents) on an individual basis that will determine if the AD needs to stay with the pupil at all times, or whether it can be easily located.

IHCP are also stored with the AD.

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

As a school we will take the following measures to prevent contamination, such as:

- 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 will be clearly labelled with the name of the pupil for whom they are intended
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance

Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

Snack / Class Parties:

- Staff receive appropriate training and are able to identify pupils with allergies
- Staff will be provided with details of pupils with food allergies
- Staff will understand how to read labels for food allergens
- Staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

Lunchtime Catering (Outside Contractor):

- 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)
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

PFA events

These events should:

Follow the school's allergy policy

- The PFA should agree that all school/PFA events involving food follow the school's allergy procedures.
- The Deputy Headteacher should be the point of contact for allergy questions.

Know which children have allergies

- Before an event, the PFA should liaise with the school rather than relying on parents or volunteers to remember individual children's allergies.
- Volunteers should never assume that food is safe because it is described as "free from" an allergen.

Have an allergen-information system

- For every food being provided or sold, the person responsible (????) should know the ingredients and the presence of the 14 regulated allergens.
- Keep ingredient packaging/labels available so information can be checked.
- If a volunteer cannot establish whether food contains an allergen, it should not be given to the child with that allergy.

Be particularly careful with homemade food

- If the PFA accepts homemade cakes or other food, establish a clear procedure for recording the ingredients.
- Consider whether the safest approach for events is to use commercially packaged food with clear ingredient information.
- Don't rely on statements such as "I've made it before and it was fine" or "there aren't any nuts in it."

Don't create a false "allergy-free" environment

- Avoid promising that a PFA event is completely "nut-free" or "allergen-free". (Current DfE guidance specifically recommends an allergy-aware approach rather than relying on a "nut-free" policy)

Label food appropriately

- For food that falls within the prepacked for direct sale (PPDS) rules, the appropriate name and full ingredients list, with allergens emphasised, are required.

After School Club Providers:

The Allergy Safety Lead will contact the ASC providers to:

- ensure that they have received relevant training
- are aware of any children in their care that may be at risk of an allergic reaction
- ensure that the correct medication is with identified children

Supply Agency staff:

The Allergy Safety Lead will ensure that any outside agency staff that may become responsible for identified children at risk of an allergic reaction, are aware of:

- their IHCP and mitigating factors (given to them at the point of signing in and DBS being shared)

Should there be a change in routine for identified children with a supply teacher, then the office staff will ensure that the medication is in the correct place. E.g. if the child needs to go to ABC, then the office staff delivering this message will know to inform the supply teacher to give the medication to the child if this is a change in routine.

Insect bites/stings

When outdoors:

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

Tree Survey

The school will carry out a tree-survey of the immediate grounds and forest school. Any trees that could be a potential risk will be highlighted and details shared with parents.

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 visits and 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 ADs 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 below)

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

Adrenaline devices (ADs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, the school will follow these procedures for 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:

- In the classroom, accessible at all times
- **No more than** 5 minutes away from where they may be needed. The pupil's Individual Action Plan will detail specifics of how this will be achieved due to location of classroom and other communal areas.
- Spare ADs will be stored in key locations: The office and the infant FA storage, in the infant hall
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

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.

The action plan will include details:

- Confirming that the Parent / Carer will be responsible for handing the pupil's ADs to the class teacher / other adult who is at the classroom door to welcome the pupil in the morning. They will also be responsible for the collection of these from the releasing adult at the end of the day.
- The Parent / Carer will be responsible for checking the expiry dates of the prescribed AD, and replacing as necessary
- Records of individual pupils with prescribed adrenaline will be held in their pupil file, with a copy held by the parent/carer and Inclusion Lead/Admin.
- Details will be recorded on Arbor and TEAMS. A List of all pupils with ADs will be held in the main school office/TEAMS

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 (Deputy Headteacher)/Inclusion Admin is responsible for sourcing spare ADs and an emergency asthma reliver inhaler, ensuring they are stored according to the guidance.

Spare ADs and inhalers:

- Will be purchased from a recognised provider
- The number purchased will be dependant on site to ensure all buildings and communal areas have access within the 5 minutes window
- The dosage purchased will be based on the Resuscitation Council UK's age-based criteria, see page 11 of the AAI guidance. Ensuring we have suitable devices to cover all ages of pupil in the school.

Spare ADs will be stored:

- In an appropriate central location (the school office) that is always unlocked and accessible to staff only
- **No more than** 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

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

The Allergy Safety Lead (Deputy Headteacher)/Inclusion Admin are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliver 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.

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 advanced 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, 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

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events. Details of how this will be managed will form part of the individual trip risk assessment.

A travel kit of spare ADs for emergency use will be provided for use on school trips and off-site events.

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, 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 the pupil 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 the Allergy Safety Lead. 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 hospitalization. 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 during ASC. 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.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergies, the risks they pose, 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 allergies, 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 allergies 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')

All staff will recieve certificated training . This will be completed every September for all staff, with any joiners during the year able to complete ad-hoc as part of their induction. School employed supply staff will be included in this process. Agency Staff will have completed their training via the Supply Agency and confirmation will be held on file.

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.
- The school will utilise resources available (e.g. The Allergy School) to inform and raise awareness with pupils about allergies.

Wellbeing

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher / teaching assistant
- 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 above for more detail on incidents and 'near misses'.

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.

Monitoring arrangements

- This policy will be monitored by the Allergy Safety Lead.
- It will be reviewed annually, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

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
- Behaviour policy

Appendix A – Pupil Allergy Notification Form

PUPIL'S NAME: _____ DATE OF BIRTH: ___/___/_____

GP's Name and Telephone Number: _____

Emergency Contact Information

Name:	Name:
Relation to pupil:	Relation to pupil:
Address:	Address:
Home / Work telephone number:	Home / Work telephone number:
Mobile telephone number:	Mobile telephone number:

****

My pupil has known allergies ☐

What is your pupil allergic to?
Please outline all known allergies, the severity of the reaction and whether the allergy is triggered by ingestion, contact or inhalation.

_____
_____
_____
_____
_____
_____

Is your pupil an adrenaline auto-injector carrier?

Yes ☐ No ☐

If yes, what date does your pupil's current adrenaline auto-injector expire? ___/___/_____

Have you provided a copy of your pupil's Allergy Action Plan, provided by your GP or allergy clinic?

Yes ☐ No ☐

Please note that it is the responsibility of the parent or carer to ensure an in-date adrenaline auto-injector accompanies the pupil to school at all times.

Does your pupil require any medication for their allergies?
Please outline all prescribed medication, the dosage required and how often it should be administered, special precautions, storage requirements and any known side effects -

_____
_____
_____
_____
_____

What constitutes an emergency for your pupil? What action should the school take if this occurs?

_____
_____
_____
_____
_____

Is there any other information about your pupil's allergies that you would like the school to know?

_____
_____
_____
_____
_____

****

My pupil <u>does not</u> have any known allergies ☐

* **********

All to complete please:

I understand that the medical information contained in this form may be shared with individuals involved with the care and education of my pupil. ☐

I understand that I must immediately notify the school, in writing, if there are any changes to the information provided on this form. ☐

The school holds emergency auto-injector devices on site - I give consent for a school auto-injector device to be used on my pupil, should an anaphylaxis emergency arise. ☐
(we seek consent, but please be aware if your pupil were to have an anaphylaxis emergency whilst in school, we will administer the auto-injector when vital for saving a life)

Form Completed By: _____ (print name)

Relation to Pupil: _____

Date Completed: ___/___/_____

Appendix B – Staff Allergy Notification Form

Name: _____ Date of Birth: ___/___/_____

GP's Name & Telephone Number: _____

I have a known Allergy YES / NO

What are you allergic to?
Please outline any known allergies, the severity of the reaction and whether the allergy is triggered by ingestion, contact or inhalation.

_____
_____
_____

Do you carry an adrenaline auto-injector? YES / NO
If yes, what date does your current auto-injector expire? ___/___/_____
Where do you keep this during the school day? _____
Do you give school consent to administer this in an emergency? YES / NO

Do you have an allergy action plan from a GP or Allergy Clinic? YES / NO
If yes, please provide a copy.

Please provide details of all prescribed medication you hold for allergies, the dosage required, how often it should be administered, special precautions, storage requirements and any known side effects:

_____
_____
_____

What constitutes an emergency for you? What action should the school take if this occurs?

_____
_____
_____

Is there any other information about your allergies that you would like the school to know?

_____
_____
_____

Who should we contact in an emergency?

Name: _____ Relationship to you: _____

Home / Work Telephone: _____ Mobile: _____

I GIVE CONSENT FOR THE SCHOOL TO ADMINSTER THE EMERGENCY AUTO-INJECTOR HELD ON SITE SHOULD AN ANAPHLAXIS EMERGENCY ARISE YES / NO
(we seek consent, but please be aware if you were to have an anaphylaxis emergency whilst in school, we will administer the auto-injector when vital for saving a life)

Signed: _____ Date: ___/___/_____

Appendix C – Visitor Allergy Notification Form

Name: _____ Date of Birth: ___/___/_____

GP's Name & Telephone Number: _____

I have a known Allergy YES / NO

What are you allergic to?
Please outline any known allergies, the severity of the reaction and whether the allergy is triggered by ingestion, contact or inhalation.

_____
_____
_____

Do you carry an adrenaline auto-injector? YES / NO
If yes, what date does your current auto-injector expire? ___/___/_____
Where do you keep this during the school day? _____
Do you give school consent to administer this in an emergency? YES / NO

Do you have an allergy action plan from a GP or Allergy Clinic? YES / NO
If yes, please provide a copy.

Please provide details of all prescribed medication you hold for allergies, the dosage required, how often it should be administered, special precautions, storage requirements and any known side effects:

_____
_____
_____

What constitutes an emergency for you? What action should the school take if this occurs?

_____
_____
_____

Is there any other information about your allergies that you would like the school to know?

_____
_____
_____

Who should we contact in an emergency?

Name: _____ Relationship to you: _____

Home / Work Telephone: _____ Mobile: _____

I GIVE CONSENT FOR THE SCHOOL TO ADMINSTER THE EMERGENCY AUTO-INJECTOR HELD ON SITE SHOULD AN ANAPHLAXIS EMERGENCY ARISE YES / NO
(we seek consent, but please be aware if you were to have an anaphylaxis emergency whilst in school, we will administer the auto-injector when vital for saving a life)

Signed: _____ Date: ___/___/_____