

WHOLE-SCHOOL POLICY FOR MANAGING LIFE-THREATENING ALLERGIES

This policy has been written in line with the DfE statutory guidance "Supporting pupils with medical conditions at school" and the Equality Act 2010.

1. Policy Statement

The school is committed to providing a safe and inclusive environment for all children. Many children live with severe allergies that can be life-threatening. These allergies may be triggered by ingestion, inhalation, touch/contact, environmental exposure, or stings/medications.

All staff have a statutory duty of care and **must** understand risks, follow procedures, and implement children's Individual Healthcare Plans (IHPs) / Allergy Care Plans at all times.

This policy applies to **all school staff**, including teachers, support staff, lunchtime supervisors, kitchen staff, peripatetic staff, volunteers, and supply staff.

This duty of care forms part of the school's safeguarding responsibilities and obligations under the Equality Act 2010.

2. Scope of Allergies Covered

This policy covers, but is not limited to:

- **Food allergies:** top 14 allergens including eggs, nuts, dairy, fish/shellfish, sesame, wheat, soya, fruits, additives, etc.
- **Contact allergies:** latex, cleaning products, soaps, plants, animals, face paints, sun creams and some cosmetics containing nut or peanut oil.
- **Airborne/environmental allergies:** aerosols, perfumes, cooking vapours, dust, pollen.
- **Medication allergies,** including products containing medical-grade peanut oil.
- **Severe insect/bee/wasp sting allergies.**

All allergies with potential for **anaphylaxis or other medical emergencies** must be managed according to this policy.

3. Roles and Responsibilities

3.1 Senior Leadership Team (SLT)

- Ensure all staff read, understand, and sign the allergy policy annually.
- Ensure all relevant staff have annual anaphylaxis training using approved guidance.
- Ensure care plans and medication are accessible and reviewed at least annually.

3.2 Designated Medical/First Aid Lead

- Maintain an up-to-date list of children with life-threatening allergies.
- Ensure Individual Healthcare Plans (IHPs) / Allergy Care Plans are available in:
 - classrooms
 - staff room

- school office
- kitchen
- lunchtime first aid trained supervisor folder
- trip packs
- Check expiry dates on medication termly.
- Coordinate staff training, including EpiPen/auto-injector use, on an annual basis or as required.

All care plans will be stored securely and shared on a need-to-know basis in line with data protection requirements.

3.3 All Staff

- Must read and understand the child's IHP/care plan.
- Must follow procedures consistently.
- Must never give food to a child with an allergy unless pre-approved.
- Must act immediately if symptoms of an allergic reaction occur.

3.4 Kitchen and Catering Team

- Must follow strict food-handling guidelines (see Section 7).
- Must know all children with food allergies and their specific requirements from the care plans.

4. Individual Healthcare Plans (IHPs) / Allergy Care Plans

Each child with a life-threatening allergy will have a personalised care plan detailing:

- The allergen(s) and type of allergy (ingestion, touch, airborne).
- Early warning signs and symptoms.
- Emergency procedures.
- Location and type of medication (EpiPen/Jext pen, inhaler, antihistamine).
- Steps for prevention in classroom, lunch hall, playground, and on trips.
- Risk assessment information (e.g., high-risk activities).
- Contact information for parents and medical professionals.

All staff must:

- Know where the plan is kept.
- Follow it precisely.
- Review updates shared by SLT/medical lead immediately.

5. Allergy Prevention: Whole-School Measures

- **No food sharing** under any circumstances.
- **Handwashing** before and after eating must be supervised for younger children.
- Children should only eat food provided by school or approved from home.
- Children with allergies will wear a lanyard and be supervised when served lunch.
- Red tray will be used for children with allergies.
- Classrooms must be cleaned after activities involving food, sticky substances, or allergens.

- Staff must avoid using allergens in curricular activities (e.g. egg boxes, certain art materials).
- Avoid aerosol products in school (e.g. sprays, perfumes).
- Staff must follow the child's plan regarding touch/contact allergies (e.g. wearing gloves).

6. Lunchtimes and Food Handling Procedures

6.1 Kitchen & Catering Staff

- Follow strict cross-contamination prevention procedures:
 - Separate preparation areas, utensils, cutting boards, and storage where necessary.
 - Thorough cleaning between food items.
- Clearly label meals for children with allergies, keeping them in a specific place.
- Ensure all substitute meals meet the child's care plan requirements.
- Check all ingredient lists and supplier allergen information.

6.2 Lunchtime Supervisors

- Must know which children have severe allergies.
- Carry relevant medication (epi-pens/Text pens) at all times (including playground).
- Ensure the child sits in a designated safe area if the care plan requires it.
- Check for unsafe foods nearby.
- Supervise closely during mealtimes; maintain visual line of sight.
- Wipe tables thoroughly between sittings.
- Ensure the child does not collect dropped food from the floor.
- Assist with handwashing routines.

6.3 Packed Lunch Monitoring (if applicable)

This will apply where a risk assessment identifies a significant risk to a child with a life-threatening allergy.

- Staff must check for allergens if parents have been instructed to avoid sending them. This will apply to all allergens for children in the class.
- Any concerns must be addressed immediately and safely removed.

7. Classroom and Playground Procedures

7.1 Classroom

- Remove or avoid allergens in teaching activities (e.g. sensory trays, cooking lessons).
- Follow care plans for contact allergies, including:
 - Avoiding physical touch with allergen-containing materials.
 - Ensuring surfaces are cleaned before seating children.
 - Wearing gloves where recommended.
- Use allergen-safe alternatives for play activities.

7.2 Playground

- Staff must maintain awareness of environmental risks (e.g. bees).
- Children with severe insect allergies may wear protective clothing as per care plan.
- Supervisors must carry or have rapid access to emergency medication.

8. Trips, Visits, and Off-Site Activities

- The visit risk assessment must specify the arrangements required for children with allergies. Auto-injectors and other medication must be carried by a trained adult at all times.
- All trip staff must be briefed on:
 - triggers
 - symptoms
 - procedures
 - who is responsible for medication
- Food arrangements must be checked in advance with venues or providers.

9. Emergency Procedures for Allergic Reactions

All staff must recognise symptoms, which can include:

- Rash, hives, swelling
- Itching or tingling mouth/lips
- Coughing, wheeze, throat tightness
- Difficulty breathing or speaking
- Drop in blood pressure, collapse
- Vomiting after exposure

Symptoms will vary . The information from the initial parent meeting must be used as specific to each child.

If a severe allergic reaction is suspected (anaphylaxis):

1. **Administer the child's auto-injector immediately.**
Do not wait to see if symptoms worsen.
2. **Call 999** and state "anaphylaxis".
3. **Call the child's parents.**
4. If symptoms persist after 5 minutes and the care plan allows, **administer a second auto-injector.**
5. Keep the child lying down unless they are struggling to breathe.
6. Never leave the child unattended.

All incidents must be recorded and reported to SLT and parents.

Staff are authorised to administer emergency medication in line with training and the child's care plan.

10. Staff Training

- Annual whole-staff training on:
 - Anaphylaxis recognition
 - Use of auto-injectors (EpiPen, Jext, Emerade)
 - Emergency procedures
- Additional training for new staff and supply staff upon arrival.
- Catering and lunchtime staff must have enhanced allergen training.

11. Documentation and Review

- All staff must sign to confirm they have read and understood this policy.
- The allergy policy will be reviewed annually or earlier if guidance changes.
- Individual Healthcare Plans must be reviewed at least annually and after any reaction.

A meeting will be held with parents at the beginning of the year, on admission, or following any new diagnosis, or when a mid-year change of teacher is needed.

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