Newburgh
Primary School

Allergy Safety Policy
(DfE template July 26)

Allergy Safety Policy

In line with statutory guidance and Section 34 of the Children's Wellbeing and Schools Act 2026, this policy outlines Newburgh Primary Schools arrangements for Allergy Safety in School.

Mrs Slater, Deputy Headteacher and SENDCo has overall responsibility for allergy safety, including driving implementation of this policy and leading a review of this policy at least annually.

Where an incident or "near miss" occurs, this policy will be reviewed following an investigation, and updates will be made regarding suggested areas for improvement based on lessons learnt. This is essential where incidents suggest that policies or procedures may leave individuals with allergy at risk.

The Governing Body will ensure the allergy safety policy is readily accessible to all parents and staff. This policy will be published on the school website and made available in a hard copy on request.

Culture

Awareness training

All staff will receive allergy awareness and emergency response training at least annually either as part of their induction in year or as part of whole school training at the start of the academic year.

Allergy awareness and emergency response training will include all teaching and support staff including admin staff, pastoral staff and midday supervisors.

The school will also offer the third-party catering contract (Educaterers Ltd) staff the same training to ensure a consistent and joined up approach.

A member of the senior leadership will provide training via a whole school presentation to enable challenge and clarification for staff. In addition, staff will also be asked to watch the following three medical conditions videos on the Warwickshire Child and Family Wellbeing website (Anaphylaxis, Childhood Asthma, Epilepsy Awareness Training).

https://warkschildandfamily.co.uk/professional-services/long-term-medical-conditions-information-pack/

A copy of the whole school allergy awareness and emergency response training will also be shared with temporary staff such as supply teachers, peripatetic staff, agency workers and regular volunteers working with pupils.

School Allergy awareness training will ensure 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;
    - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).

- training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);
- Understand the impact allergy can have on a child or young person's wellbeing;
- Understand the school, college or setting'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").

Staff will be made aware that training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

Wellbeing

In order to support the wellbeing of children and young people with allergies, Newburgh Primary will actively provide support in the following ways:

- Regular communication to children, young people parents and staff about allergy, ensuring ongoing awareness and appreciation of the severity of potential risks.
- Proactive engagement with new joiners with known allergy setting out the schools' policies and the support available.
- Inviting new joiners with allergies to have a tour of the school kitchen and hall facilities and meet staff to become familiar with the lunchtime environment. This may help reduce anxiety, and will ensure people get to know one another which will support staff to identify children with known allergies, intolerances and coeliac disease in the lunch halls.
- Introducing 'allergy champion' roles for staff (not just within the catering team) and children. Acting as a point of contact for children, young people and staff with allergies. Allergy Champions will share feedback and support new joiners or anxious children or young people.

Newburgh Primary School will review these arrangements with children, young people and staff with known allergies to continue to develop and review them.

Minimising risk

In order to minimize the risk of individuals coming into contact with their known allergens, Newburgh Primary will implement the following measures:

- Ensure we work in partnership with our chosen catering provider (Educaterers Ltd) to communicate all known allergens for pupils, staff and visitors in a timely manner.
- Parents will be regularly reminded via school newsletter to update their child's school record with the school office with any new information regarding medical conditions, allergies and any prescribed emergency medication.
- The school office staff will ensure that all new or updated allergy information will be processed in a timely manner and input into the school's management information system

(MIS). An updated medical conditions (including allergies) report will be produced and shared with all staff.

- In addition to a sims list the school office also produces a list of children with known allergies which includes their photograph and year group to support staff in identifying and supporting children with known allergies. This list includes their known allergens advised by parents.
- a copy will be distributed by email to all staff
- and also printed for inclusion in class room first aid boxes and on the class pupil passport
- a hard copy will also be available in the staff room and lunch halls for immediate reference of staff
- a hard copy will be provided to the catering manager
- Ensure our catering provider is able to offer a menu which offers a variety of options of meal choices to ensure inclusion, with allergens clearly labelled.
- Ensure the menu is shared with parents/carers/staff as early as possible to enable them to make an informed choice, taking allergen information into consideration.
- Ensure our catering provider prepares meals in a way that limits any cross contamination between meal options where allergens are known.
- Ensure that pupil meal choices are checked by the school office and school kitchen staff before being served to pupils as an additional check that a meal containing a known allergen isn't being prepared.
- Ensure that all pupils with a known allergen are given a PURPLE wrist band to wear in the lunch queue to swap for their chosen meal.
- Ensure that teaching staff and support staff (including office staff and Midday supervisors) have sufficient induction and annual allergy awareness training to feel confident in being able to identify an allergic / anaphylactic reaction and know how to respond quickly and take the correct action.
- Teaching staff and Midday Supervisors will actively work with pupils to ensure they understand the importance of not sharing or swapping food. Midday supervisors should be extra vigilant in the lunch hall and staff on tuck duty that pupils are not swapping food.
- Where pupils/staff have known allergens / severe allergic reactions consideration will be given talking to a particular group/class of children or staff to educate about the risk of danger and emergency actions needed. Consent may need to be sought from parents.

Control Measures for Airborne and Contact Allergens

Where a child or young person has a known allergy to airborne or contact allergens, the school will implement reasonable adjustments to minimise the risk of exposure. Control measures may include:

- An Individual Healthcare Plan (IHP) will be developed and reviewed regularly with parents/carers and relevant healthcare professionals where appropriate.
- Staff will be made aware of the child's specific allergens, symptoms of an allergic reaction, and the emergency procedures to follow.
- Appropriate seating arrangements or classroom adjustments will be considered where necessary to reduce the likelihood of exposure.

- Activities involving known allergens (for example, arts and crafts, science experiments, cooking, sensory play, gardening or animal handling) will be risk assessed in advance. Suitable alternatives or adjustments will be provided where required.
- Good hygiene practices will be promoted, including regular handwashing before and after eating and after activities involving potential allergens.
- Tables, work surfaces, and shared equipment will be cleaned using appropriate cleaning procedures to reduce allergen contamination.
- The school will minimise the use of products containing known allergens where a pupil is at risk, where this is reasonably practicable.
- Classrooms and learning environments will be kept well ventilated where airborne allergens are identified as a trigger and where this is appropriate for the allergen concerned.
- Staff will discourage the unnecessary sharing of food, drinks, utensils, and personal items.
- Educational visits, residential visits, clubs and school events will include allergy considerations within the planning and risk assessment process.
- Supply staff, volunteers, and other adults working with the child will be informed of relevant allergy risks and emergency procedures.
- Where prescribed, emergency medication such as adrenaline devices will be readily accessible at all times, and all staff will be trained in recognising anaphylaxis and administering emergency medication.
- Emergency procedures will be clearly communicated, including immediate access to emergency medication, calling emergency services when appropriate, and informing parents/carers following any allergic reaction.
- The school recognises that it cannot guarantee an allergen-free environment. Instead, it will take reasonable, practical steps to reduce the risk of exposure while supporting the child to participate fully and safely in school life.

Food allergy

Newburgh Primary School uses Educaterers Ltd to provide a full catering service for pupils, staff and visitors on a daily basis. The school share all allergy and intolerance data with the Catering team as soon as it is received.

The following measures are in place to help manage the risk of food allergy:

- Educaterers Ltd produce a detailed three weekly menu which includes details of allergens and offers 4 daily options to enable variety and choice. This menu is uploaded to the school website and also sent out to parents for their daily reference.
- New menus are always shared in advance of being put into place.
- Pupils, staff and visitors are able to make a daily choice about which option they would like to order.
- On receipt of the options, the school office completes a check to ensure that any children with allergies have not accidentally chosen an option that they are not allowed to eat.
- Any anomalies are quickly addressed with the class teacher and pupil and an alternative appropriate (safe) option selected instead.
- Once meal choices are confirmed by the school office, they are shared with the school kitchen to enable them to prepare and cook.

- The school office counts out colour coded wrist bands for each class depending on the meal choices ordered for that day. In addition to a meal choice band, all children with allergies are also given a PURPLE band which signifies to all staff that they have an allergy.
- The class teacher is able to perform another check when handing out bands to pupils before the lunch break to ensure that pupils with known allergies are given a PURPLE band.
- The school office are able to issue any additional or missing bands after checking the register.
- At lunchtime pupils are asked to line up at the kitchen counter to swap their band for their chosen meal. This allows the kitchen staff to perform another check that the correct meal is handed to the correct pupil. The PURPLE band is another reminder to double check that allergy children are provided with the correct meal which does not contain their allergen. Kitchen staff have photos of the children with their allergen next to the serving counter.

Individual children and young people

Identification

- Parents/Carers are asked to complete an admission form for new pupils before their admission to share key pupil information. This form clearly asks parents/carers to share information regarding known medical conditions, allergies and any prescribed emergency medication. The form will be distributed and processed by the main school office before admission.
- The school office manager will take responsibility for contacting parents/carers should further clarification/guidance be needed regarding an allergy and any reasonable adjustments that might need to be considered and implemented then communicated with staff.
- All new staff are asked to share information regarding known medical conditions, allergies and any prescribed emergency medication before their start date to ensure reasonable adjustments can be considered and occupational health support arranged where necessary.
- Parents will be regularly reminded via school newsletter to update their child's school record with the school office with any new information regarding medical conditions, allergies and any prescribed emergency medication.
- The school office staff will ensure that all new or updated allergy information will be processed in a timely manner and input into the school's management information system (MIS). An updated medical conditions (including allergies) report will be produced and shared with all staff.
- In addition to a sims list the school office also produces a list of children with known allergies which includes their photograph and year group to support staff in identifying and supporting children with known allergies. This list includes their known allergens advised by parents.
    - a copy will be distributed by email to all staff
    - and also printed for inclusion in class room first aid boxes
    - a hard copy will also be available in the staff room and lunch halls for immediate reference of staff
    - a hard copy will be provided to the catering manager
- All visitors to school will sign in using the sign in app at the main school office. All visitors will be asked to inform the school office about any known allergies or emergency medication they might carry as part of the signing in process (from Sept 2026). Visitors will be advised they can ask the school office manager for a confidential conversation away from the school office to share this information if required.
- Where in-year pupil admissions occur the school office will endeavor to contact the transferring school arrange for a CTF to be uploaded on the school share portal to enable the secure transfer of

pupil data. This could include information regarding medical conditions, allergies, any prescribed emergency medication, individual healthcare plans or care plans.

Individual Healthcare Plans

The school will ensure that all pupils with allergies who require additional support have an Individual Healthcare Plan (IHP) in place. An IHP will be developed where a pupil:

- has an allergy that has a functional impact on their participation in school life;
- is at risk of harm as a result of their allergy; and/or
- requires support or arrangements that are additional to or different from those provided for all pupils.

The Individual Healthcare Plan will be developed in partnership with parents/carers, the pupil (where appropriate), relevant healthcare professionals, and school staff. The plan will clearly identify:

- the pupil's allergy and known allergens;
- signs and symptoms of an allergic reaction, including anaphylaxis where applicable;
- measures to minimise the risk of exposure to allergens within the school environment;
- any reasonable adjustments required to enable the pupil to participate fully in school life, including educational visits, clubs, sporting activities and other off-site activities;
- medication required, including the location of adrenaline devices or other prescribed medication, and who is trained to administer it;
- emergency procedures, including actions to be taken in the event of an allergic reaction and arrangements for contacting emergency services and parents/carers;
- the roles and responsibilities of staff in implementing the plan.

Where a pupil has an Allergy Action Plan and/or Asthma Action Plan provided by a healthcare professional, this will be attached to or referenced within the Individual Healthcare Plan. School staff will follow the healthcare professional's instructions when responding to an allergic emergency.

Individual Healthcare Plans will be:

- completed before, or as soon as reasonably practicable after, a pupil with an identified allergy starts at the school;
- reviewed at least annually and sooner if there is any change to the pupil's allergy, prescribed medication, treatment, or support needs;
- updated whenever a revised Allergy Action Plan or Asthma Action Plan is provided by a healthcare professional;
- made available to relevant staff while maintaining the pupil's confidentiality and complying with data protection requirements.

The school will ensure that all staff who have responsibility for a pupil with an Individual Healthcare Plan are made aware of its contents and receive appropriate information and training to enable them to implement the plan safely and effectively.

Prescribed adrenaline

- Parents/Carers of children and young people who are prescribed adrenaline devices will be required to provide an adrenaline device daily or provide a 'spare' for school to store which clearly names the pupil to be kept either on the child's desk or in the first aid box under the teacher's desk.
- Statutory guidance dictates that adrenaline devices should be administered within 5 minutes of a suspected anaphylaxis reaction.
- Where children with prescribed adrenaline devices access forest school and/or PE, their adrenaline device should be carried over to the forest school area/or PE by the child and checked by the adult in charge.
- The school office will add any adrenaline devices for school storage to an emergency medication list which will clearly display the pupils name and the expiry date.
- As expiry dates approach the school office will notify parents/carers of their impending expiration in order to arrange for replacement to be arranged and provided.
- Children with prescribed adrenaline devices will be included on the school photographic medication list which is shared with all staff and their emergency medication will be detailed.
- Staff teaching children with a device are all responsible for ensuring they are confident where adrenaline devices are held and can be accessed at any time.
- All children who have a prescribed adrenaline device will have an allergy action plan. These will be stored in the school shared one drive folder accessible to all staff and a hard copy held:
    - With the prescribed adrenaline device in the school office
    - In the staff room accessible to school staff (confidentiality front cover applied)
    - In classroom first aid boxes for staff reference
- Teachers are responsible for ensuring that children with prescribed adrenaline devices are included on all school visit / trip risk assessments and their emergency medication taken offsite with them and easily accessible at all times during the visit. The risk assessment should include details of what control measures will be put into place to minimize the risk of exposure to known allergens during the school visit / trip.

School-wide policies

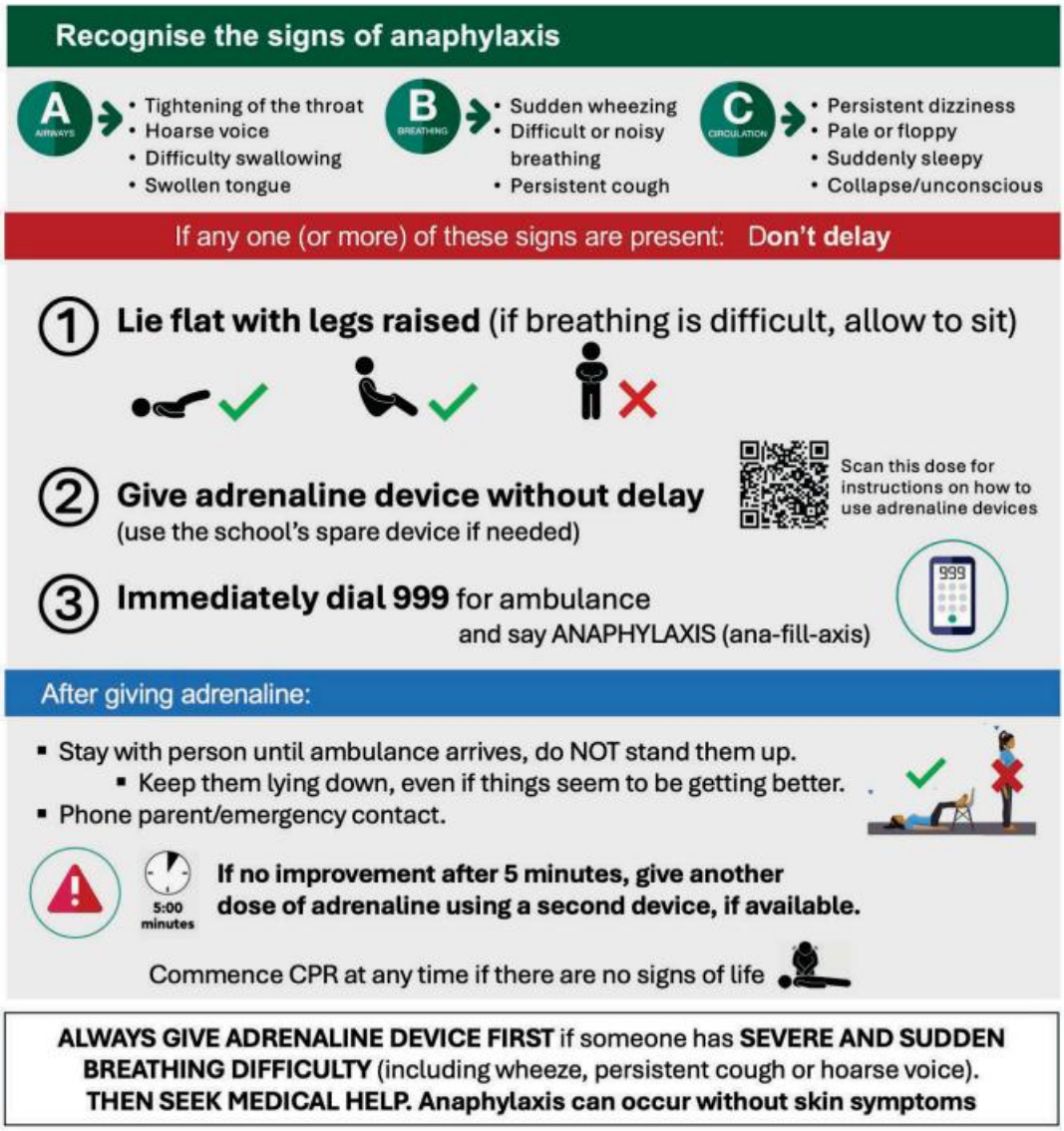
"Spare" adrenaline devices

The school office staff are responsible for managing medication in school, this includes maintaining a list of medication held with their expiry dates and includes the "spare" adrenaline devices. Office staff monitor dates and repurchase new "spare" adrenaline devices before old devices expire. Expired devices not used are taken to the local pharmacy for safe disposal.

In line with DfE guidance Newburgh Primary School will ensure that no child or young person is more than five minutes from an adrenaline device at all times.

"Spare" adrenaline devices will be used and managed as follows:

- Due to the size of the school site, the position of the forest school area and the regular occurrence of external visits, the school shall purchase two pairs of "spare" adrenaline devices to be held for emergency situations.
- "Spare" adrenaline devices will always be stored in the main school office area medical cupboard (staff should make themselves familiar with where they are held) in pairs (so that if a second one is necessary it is on hand rather than needing to be obtained from elsewhere) and will be clearly labelled "emergency anaphylaxis kit"
- The "emergency anaphylaxis kit" will include a pair of "spare" adrenaline devices and a "spare" emergency asthma reliever inhaler and spacer along with an up-to-date consent list.
- "Spare" adrenaline devices will always be readily accessible and will never be locked away
- Staff should only use "spare" adrenaline devices to administer adrenaline when they believe that either a pupil, staff member or visitor is suffering an anaphylactic reaction.
- In the event of an anaphylaxis, adrenaline should be administered as soon as possible. In practice, this should be no more than five minutes, i.e. adrenaline devices must be able to be brought to the person having anaphylaxis within 5 minutes. If a spare device is administered then you would immediately dial 999.
- "Spare" adrenaline devices should be used to administer adrenaline as demonstrated in the Warwickshire Child and Family Well-being anaphylaxis medical conditions training video watched by all staff, https://warkschildandfamily.co.uk/professional-services/long-term-medical-conditions-information-pack/ and in line with the DfE guidance detailed below:



Responding to an allergic reaction and anaphylaxis

Mild to moderate allergic reactions which do not involve **A**irway/**B**reathing/**C**irculation can be treated with oral antihistamines. For a child or young person, telephone their parent or emergency contact to tell them about the reaction. Do not leave the child or young person unattended. The child or young person does not normally need to be sent home or require urgent medical attention. They should be observed in a safe place for at least 60 minutes after reaction, as mild reactions can sometimes develop into anaphylaxis.

Anaphylaxis commonly occurs alongside mild symptoms or signs, such as an itchy mouth or skin rash. Anaphylaxis can also occur on its own, without a skin rash or other mild signs being present.

Anaphylaxis (i.e. any reactions which involve the **A**irway/**B**reathing/**C**irculation) must be treated promptly with emergency adrenaline (see figure 2). The individual's prescribed adrenaline device – for example an adrenaline auto-injector (AAI) or nasal adrenaline device – should be used if it is available. If not, a "spare" adrenaline device can be used (see below). If in doubt whether the reaction is anaphylaxis, treat with adrenaline. Always dial 999 to request an ambulance if someone is experiencing anaphylaxis. The emergency ('999') operator can provide advice over the telephone if needed.

Always stay with someone having an allergic reaction for at least one hour.

- **If in doubt, always treat for anaphylaxis**
- If the child or young person has a Allergy Action Plan issued by a healthcare professional, it should be followed
- Treatment of anaphylaxis is with a dose of adrenaline (e.g. an AAI "pen" or nasal adrenaline device)

Action in an emergency

If an individual (whether a child, young person, member or staff or visitor) experiences a life-threatening medical emergency, **anyone – staff, volunteers or bystanders – may take reasonable action to save their life. The law recognises that rescuers act under extreme pressure**.

People who attempt to save a life in good faith are protected, even if an injury occurs while giving emergency care (for example, broken ribs during CPR are common and not a sign of wrongdoing). This includes administering adrenaline when an individual is suffering anaphylaxis.

Staff in schools, colleges and early years settings should be reassured that mistakes, hesitation, or imperfect technique do **not** amount to serious and wilful misconduct. The expectation is simply that staff act reasonably, to the best of their ability, in an emergency.

Visits and trips

- Teachers are responsible for ensuring that children with prescribed adrenaline devices are included on all school visit / trip risk assessments and their emergency medication taken offsite with them and easily accessible at all times during the visit. The risk assessment should include details of what control measures will be put into place to minimize the risk of exposure to known allergens during the school visit / trip.

- There will always be a member of school staff who takes responsibility for monitoring any children with known allergies on school trips who will take responsibility administering an adrenaline device during a visit should anaphylaxis occur.
- School visit / trip risk assessments will also detail that school staff will also be allergy aware of any children displaying allergy symptoms who do not have known allergies who may be having their first allergic reaction.
- School visit / trip risk assessments will also detail that school staff are confident about the emergency action they need to take should a child suffer an anaphylaxis reaction.
- Children will never be excluded from attending school visits / trips because of a known allergy.
- Depending on the location of a school visit / trip, the planned activities, number of children and known allergies, a decision may need to be made to take a spare school adrenaline device (held in the school office) in addition to any prescribed adrenaline devices as long as it leaves sufficient adrenaline device provision in school.

Serious incidents and "near misses"

The school will use the same LA reporting system for documenting, investigating and reporting serious incidents and near misses involving allergy safety that it does for all school incidents.

Staff who witnessed or who were part of a serious incident or near miss will be asked to complete an individual statement detailing the events and this will be shared with the Head Teacher for further investigation.

The Head Teacher may need to interview staff / children to understand where procedures may have failed.

The Head Teacher will most likely need to liaise with the area manager of Educaterers Ltd who manage our catering contract to ensure that collaboration can occur to enable procedural updates to occur where necessary and lessons learned shared.

Following investigation, consideration will be given to if any changes need to occur to policy or procedures or whether Individual Healthcare Plan arrangements were appropriate or need review.

The Head Teacher will allocate a member of SLT to manage the communication with parents / carer's regarding any serious incidents or near misses.

Where Individual Healthcare Plan need amending, Parents/Carers and their child will be invited to meet for a consultation to ensure a collaborative approach and disseminate lessons learnt.

'Failure to learn lessons from serious incidents and 'near misses' has contributed directly to deaths of children and young people in schools'

Information sharing

A child or young person's health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Schools have a lawful basis to hold, use and share a child's special category health data when this is necessary, but it should always be done in a controlled and respectful way, because unnecessary sharing can reduce children's confidence in practitioners and can be embarrassing for children and young people who may not want to be singled out.

Information about the organisations, third parties and circumstances in which Newburgh Primary will share allergy information can be found in our latest privacy notice Privacy Notice

The same applies for staff and is detailed in the staff privacy notice held in the staff shared one drive folder.

Awareness of the allergy safety policy

This policy will be shared with staff at least annually or sooner where updates may occur. It will also be shared with new staff on their induction. Staff will be reminded about the contents of this policy via whole school annual allergy awareness and emergency response training.

A copy will be shared with temporary staff such as supply teachers, peripatetic staff, agency workers and regular volunteers working with pupils.

The policy will be published on the school website and parents will be advised of its existence via school newsletter in September 2026.

Where children are prescribed adrenaline devices it may be appropriate for their friends to be made aware of how to seek help from staff in an emergency. Any wider training will be discussed on an individual basis with parents / carers and agreed arrangements documented in the child's individual healthcare plan.