WIMBLEDON CHASE PRIMARY SCHOOL

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Allergy Safety Policy

July 2026

At Wimbledon Chase Primary School, policies are designed to ensure that the child is at the centre of all our decision making. All staff are aware that whole school and class systems are established to ensure that every child is able to share and express their concerns in a safe and confidential manner. We constantly strive to ensure that all children know their worries and views will be taken seriously by all staff and that every child will be treated with respect.

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1. Aims

This policy aims to:

- Set out our school's approach to allergy management, 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

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on allergies 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
- Allergy Safety in Schools July 2026

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is the Headteacher.
They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils Ensuring:
- All allergy information is up to date and readily available to relevant members of staff

- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive annual allergy 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
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Regularly reviewing and updating the allergy policy

3.2 The Medical Lead

The Medical lead in our school is Siân Dotchin, the Medical Lead is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the allergy lead

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring appropriate arrangements are in place for school trips, visits, special events and off-site activities so that pupils with allergies can participate safely
- Ensuring the wellbeing and inclusion of pupils with allergies

3.4 Parents

Parents are responsible for:

- Being aware of our school's allergy 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
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.5 Pupils with allergies

These pupils (where age appropriate) are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector

3.6 Pupils without allergies

These pupils are responsible for:

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

4. Assessing risk

The school will conduct a risk assessment for any activity that may affect pupils who are known to be at risk of anaphylaxis, or where there is a reasonable possibility that allergens may pose a risk to pupils with previously unidentified allergies. This includes activities such as:

- lessons such as food technology
- science experiments involving food ingredients
- crafts using food packaging or allergenic materials
- off-site visits and school trips
- activities involving animals or food, including baking, mini beast visits, animal handling experiences and reading dog sessions
- situations where a visitor requires a guide dog or other assistance animal on site

Risk assessments will consider potential allergen exposure, appropriate control measures, staff awareness, emergency procedures and the inclusion of all pupils in activities as safely as possible.

5. Managing risk

5.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 Catering and Food Provision

The school works in partnership with Caterlink, the Local Authority's contracted catering provider, to support pupils with medically identified food allergies and intolerances. Whilst the school does not prepare meals directly, both the school and Caterlink share responsibilities in reducing risk and supporting pupils safely.

Caterlink is responsible for:

- providing allergen information for food served, including information relating to the recognised allergens required by law
- operating allergen management, food hygiene and cross-contamination control procedures within the kitchen and food service areas

- ensuring catering staff receive appropriate allergy awareness and food safety training
- identifying pupils with approved special dietary needs at the point of service
- working with parents, healthcare professionals and the school to risk assess and support pupils with medically identified allergies or intolerances

The school is responsible for:

- sharing relevant medical and allergy information with Caterlink in line with data protection requirements
- ensuring appropriate care plans and emergency medication are in place for identified pupils
- supporting communication between parents, Caterlink and relevant staff
- supervising pupils appropriately during mealtimes and educational activities involving food
- working with Caterlink to minimise the risk of allergen exposure whilst recognising that the school cannot guarantee a completely allergen-free environment

Parents/carers are responsible for informing the school of any diagnosed allergy or intolerance and for providing up-to-date medical information where required.

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction.

These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

5.4 Insect bites/stings

When outdoors:

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

5.5 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

5.6 Support for mental health

Pupils with allergies will have access to additional support through:

- Pastoral care
- Regular check-ins with their [class teacher/form tutor/etc.]

5.7 Events and school trips

- For events, including ones that take place outside of the school and school trips, no pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAIs

The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis. This register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAI(s)
- Where a pupil has been prescribed an AAI, parental consent is requested on the pupil's Individual Health Care Plan for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil
- A photograph of each pupil to allow a visual check to be made
- The register is easily accessible to all staff

6.2 Allergic reaction procedures

6.2 Emergency Use of "Spare" Adrenaline Auto-Injectors (AAIs) The school stocks "spare" AAIs to ensure a rapid response to anaphylaxis. In a life-threatening emergency, the following protocols apply:

- **Broad Emergency Use**: School "spare" AAIs may be administered to **any individual** (pupil, staff, or visitor) suspected of experiencing anaphylaxis, regardless of whether they have a pre-existing medical diagnosis or known allergy.
- **Unrecognised Allergies**: Staff are authorised to use a spare AAI for any child presenting with anaphylaxis for the first time due to an **unrecognised allergy**.
- **Consent and Delays**: While the school seeks advance parental consent for pupils with known allergies, statutory regulations **do not require prior consent** for a spare

AAI to be used in an emergency. Staff should prioritise the immediate administration of adrenaline over checking records, as any delay in treatment is associated with fatal outcomes.

- **Good Faith Protection**: In a life-threatening emergency, any staff member may take reasonable action to save a life. Staff are reassured that the law protects those acting in good faith to provide emergency care, and mistakes or hesitation in such high-pressure situations do not amount to misconduct.

Emergency Actions – Anaphylaxis

Anaphylaxis is a severe and potentially life-threatening allergic reaction that can occur very rapidly. It may be triggered by allergens such as certain foods, medicines, or insect stings. Immediate medical attention is required if an anaphylactic reaction is suspected.

Signs and Symptoms of Anaphylaxis

Symptoms usually develop within minutes of exposure to an allergen and may include:

- Swelling of the throat and tongue
- Difficulty breathing or rapid breathing
- Difficulty swallowing, a feeling of tightness in the throat, or a hoarse voice
- Wheezing, coughing, or noisy breathing
- Feeling tired, confused, or anxious
- Feeling faint, dizzy, or loss of consciousness
- Skin that feels cold to the touch
- Pale, blue, or grey colouring of the skin, lips, or tongue (this may be more noticeable on the palms of the hands or soles of the feet in pupils with darker skin tones)

Emergency Response

If a pupil is suspected of experiencing an anaphylactic reaction:

1. **Administer Adrenaline**: Use the pupil's prescribed AAI immediately. If unavailable, broken, or if the individual has no prescribed device, **use the school's "spare" AAI without delay**.
2. **Call 999**: State clearly that an individual is experiencing **anaphylaxis**. Inform the operator that a school adrenaline device has been administered.
3. **Positioning**: Keep the person lying flat with their legs raised (or sitting up slightly if breathing is difficult). **Do not let them stand or walk**, even if they appear to feel better.
4. **Monitor**: If there is no improvement after 5 minutes, administer a second dose of adrenaline using another device
5. Stay with the pupil and monitor their condition until emergency services arrive.
6. Inform the school office and the pupil's parents as soon as possible.

All incidents will be recorded in accordance with the school's medical and safeguarding procedures.

A school AAI device will be used instead of the pupil's own AAI device if:

- **Medical authorisation and written parental consent have been provided, or**
- **The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)**
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents informed

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAIs

The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance.

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times
- **Not** located more than 5 minutes away from where they may be needed
- Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAIs)

The Allergy Lead and the medical Lead are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near

7.4 Disposal

AAIs can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions.

7.5 Use of AAIs off school premises

For all school trips, a member of staff will collect the pupil's allergy medication from the school office before leaving the school site. This member of staff will be responsible for carrying and supervising the medication throughout the duration of the trip.

All medication must be signed out from the school office before departure and signed back in upon return. After the trip, the medication must be returned to the correct storage box in accordance with the school's medication storage procedures.

At least one member of staff who has received appropriate training to administer the medication (e.g. an adrenaline auto-injector) will accompany the trip and will be responsible for administering the medication if required.

7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A list of pupils to whom the AAI can be administered
- A record of when AAIs have been administered

8. Training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies

9. Links to other policies

This policy links to the following policies and procedures:

- Health and Safety policy
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- School Food Policy

10. Serious Incidents, "Near Misses" and Lessons Learnt

The school is committed to a **"no blame" culture** regarding allergy safety, encouraging staff to report all incidents and near misses to ensure continuous improvement and pupil safety.

10.1 Definitions

- **Serious Incident**: Any event where a pupil, staff member, or visitor is harmed or placed at immediate and significant risk of harm, requiring emergency medication (e.g., AAI administration), clinical intervention, or emergency services.
- **Near Miss**: An event that did not result in harm but had the clear potential to do so—for example, a pupil being served a known allergen but identifying it before consumption, or a system failure that could have led to a reaction under different circumstances.

10.2 Recording and Reporting
All serious incidents and near misses must be recorded as soon as feasible in the school's **Accident Book**. The record must include:

- Who was affected and the known allergens involved.
- What happened, where, and at what time.
- The suspected cause of the incident or near miss.
- How staff responded and whether emergency services were called.
- The outcome of the incident.

Notification Requirements:

- **Parents**: Must be notified of any incident or near miss as soon as possible.
- **Allergy Lead**: The Headteacher (Allergy Lead) must receive a report of all incidents to oversee the lessons learnt process.
- **Governing Body**: Will receive periodic reports on all serious incidents and near misses to monitor the effectiveness of this policy.
- **External Bodies**: The school will report allergen-related food safety incidents to the Local Authority Environmental Health team and, where applicable, report to the HSE under RIDDOR.

10.3 Lessons Learnt and Policy Review
A serious incident or "near miss" will serve as an immediate trigger for the following actions:

1. **Individual Healthcare Plan (IHP) Review**: The affected pupil's IHP and Allergy Action Plan will be reviewed in collaboration with parents and healthcare professionals to ensure arrangements remain robust.

Policy Review: The Allergy Lead will investigate the event to determine if the school's Allergy Safety Policy was followed or if it requires amendment to prevent a recurrence.

School Allergy Lead: Headteacher

Linked Governor: Chair of Governors

Date agreed: July 2026
Review date: July 2027