Allergy Safety Policy
(to be read in connection with the Allerton Grange Supporting Students with Medical Conditions Policy)

SLT Key Link	Kate Moore
Review Frequency	Annually or when an incident is experienced
Date approved	Pending Autumn 2026
Date of next review	Autumn 2027

Links with other policies	This policy should be read in conjunction with the **Supporting Pupils with Medical Conditions Policy**, which sets out the school's wider approach to supporting pupils with medical needs and contains the Individual Healthcare Plan (IHCP) template and associated medical conditions documentation. This policy provides the specific arrangements for the management of allergies, anaphylaxis, emergency medication and allergy-related risk reduction. This policy should also be read alongside the school's: • Safeguarding and Child Protection Policy • Behaviour Policy • Educational Visits Policy

Introduction and Core Principles

In line with Benedict's Law, and associated allergy safety guidance, we are committed to providing a safe, inclusive, and welcoming environment for all children, young people, staff, and visitors with allergies. Recognising the serious and potentially life-threatening risk posed by anaphylaxis, this dedicated policy establishes robust risk-mitigation measures and emergency response protocols.

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Asthma, food allergy, eczema and seasonal rhinitis (hay fever) are all forms of allergy.

Anaphylactic reactions usually begin within minutes of being in contact with the allergen i.e. eating a trigger food, though can occur several hours later (i.e. allergy to Mammalian meat). Anaphylaxis involves difficulty in breathing and affects the heart rhythm. In extreme cases there could be a dramatic fall in blood pressure leading to collapse.

Once started, anaphylaxis reactions progress quickly. Investigations into fatal anaphylaxis show that there is only a 20-30 minute window of opportunity during which steps can be taken to prevent death – therefore giving emergency adrenaline **immediately** and calling Emergency Services (999) is crucial. **Anaphylaxis always requires an emergency response**

Anaphylaxis can occur without any other signs (such as a skin rash) being present. **Always consider anaphylaxis in someone with a known food allergy who has sudden difficulty in breathing.** Giving adrenaline in this context is very safe and may be lifesaving.

The most common causes of "whole body" allergic reactions – including anaphylaxis – are:

- foods (e.g. peanuts, tree nuts, cow's milk/dairy foods, egg, wheat, fish/shellfish and sesame);
- insect stings (e.g. bee, wasp);
- medication (e.g. antibiotics, pain medicines such as ibuprofen);
- latex (e.g. rubber gloves, balloons, swimming caps).

Even for food allergy, the vast majority of anaphylaxis reactions require the person to have eaten the food, although less serious allergic reactions can happen through skin or other contact. Anaphylaxis reactions due to skin contact are very rare.

Students experiencing an allergic reaction should be monitored and managed in accordance with any available medical advice, their Individual Healthcare Plan or Allergy Action Plan where one is in place, staff training, and the circumstances of the incident.

Allerton Grange School promotes allergy awareness across the school community so that staff and pupils are encouraged to understand allergy risks, reduce avoidable exposure to known allergens, recognise signs and symptoms of allergic reactions, and follow the school's emergency procedures.

Coeliac disease and food intolerance can present symptoms which are similar to those of food allergy; it is important that Coeliac disease and food intolerance is be managed through dietary avoidance, but these conditions do not pose a risk of anaphylaxis and so they are not within this allergy safety policy.

Eczema, asthma and allergies sometimes occur together – known as the atopic triad. It is important that these are managed well in order to keep the individual healthy. Asthma training is needed by all staff and an individual's asthma care plan needs to be included with their individual healthcare plan. These conditions are not included in this allergy safety policy.

Allerton Grange School understands that severe allergies are included in the Equality Act, 2010. The act considers a person disabled if they have a physical or mental impairment that has a substantial and long-term negative effect on their ability to carry out normal daily activities. Seasonal rhinitis (such as hay fever) is explicitly excluded from the definition of disability, unless it aggravates the effect of another health condition.

Emergency Treatment and Management of Anaphylaxis

What to look for:
Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting
- mild throat tightness
- sudden change in behaviour

These symptoms are treated with antihistamines.

More serious symptoms are often referred to as the ABC symptoms and can include:

- **AIRWAY** - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- **BREATHING** - sudden onset wheezing, breathing difficulty, noisy breathing, persistent cough.
- **CIRCULATION** - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a

sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

As soon as anaphylaxis is suspected, adrenaline must be administered without delay.
Action:

- Keep the individual where they are, call for help and do not leave them unattended.
- **LIE individual FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- **USE ADRENALINE DEVICE WITHOUT DELAY** and note the time given. AAIs should be given into the muscle in the outer thigh or nasal into the nostril. Specific instructions vary by brand – always follow the instructions on the device.
- CALL **999** and state **ANAPHYLAXIS (ana-fil-axis).**
- If no improvement after 5 minutes, administer second adrenaline device
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the individual where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

Following suspected anaphylaxis, the school will call 999, state that anaphylaxis is suspected, and follow the advice of the emergency services. A person who has experienced anaphylaxis should normally receive emergency medical assessment, and ambulance transfer should be arranged wherever advised or reasonably practicable.

Minimising Risk and Exposure to Allergens

Minimising the risk of exposure to allergens is an important part of keeping pupils, staff and visitors with allergies safe. Even small amounts of an allergen can cause a reaction. **Allerton Grange School** will assess allergy risks on an individual basis and, where appropriate, implement reasonable control measures informed by medical advice, Allergy Action Plans and Individual Healthcare Plans.

The school recognises that it may not always be practical, reasonable or effective to prohibit particular foods across the whole school site. Instead, risk reduction measures will be tailored to the needs of the individual and the circumstances involved.

Where restrictions are considered necessary, they will be proportionate, time-limited and applied to the smallest practical area. For example, a particular ingredient may be restricted within a food technology classroom during a lesson involving a pupil with that allergy.

The school recognises that blanket food bans, particularly in relation to nuts, can create a false sense of security and will therefore focus on risk assessment, education, effective communication, supervision and appropriate control measures to manage allergy risks safely.

Allerton Grange School is allergy aware ensuring that the staff and students are actively aware of the risk posed by allergens, take steps to minimise the risk of exposure and have robust emergency response plans in place.

Allerton Grange School considers allergy risks as part of its wider health and safety arrangements and seeks to minimise the risk of exposure to known allergens. Risk assessments and control measures will be implemented where appropriate, taking account of the needs of individual pupils and the activities being undertaken. This may include:

- reviewing curriculum activities involving food and making reasonable adaptations where necessary;
- undertaking risk assessments for educational visits and off-site activities;
- considering how risks associated with food brought in by pupils, staff, parents or visitors can be managed;
- working with catering providers to manage allergen risks associated with food provided by the school;
- implementing reasonable measures where a pupil has a known airborne or contact allergy; and
- considering non-food allergens within the school environment and taking proportionate steps to reduce exposure where necessary.

Allerton Grange School will consider allergy risks when planning lessons, activities, visits and school events. Where appropriate, allergy risks will be included in risk assessments and reasonable control measures put in place to reduce the risk of exposure to allergens.

Allerton Grange School will seek to minimise the risk of exposure by:

- Providing allergy awareness training and information for staff
- Promoting allergy awareness amongst pupils through the curriculum and wider school activities
- Taking reasonable steps to ensure that staff, including temporary, supply and cover staff, have access to relevant allergy information and understand the school's emergency response procedures.
- Working closely with parents/carers and health professionals to understand the student's allergy
- Monitoring this policy to ensure that the agreed practices are implemented
- Establishing and maintaining high hygiene standards amongst staff, students and visitors

Food Provision and Catering:

Allerton Grange School will work closely with its catering provider to support the safe provision of food for pupils with allergies. The school will take reasonable steps to ensure relevant allergy information is shared with the catering provider in a timely manner and will work with the provider to support pupils in making safe food choices.

When staff provide food for the students, they receive additional training to ensure they understand how to read labels for food allergens and how to prevent cross-contamination during the handling, preparation and serving of food.

Where food is brought into school by staff, pupils or visitors, reasonable steps will be taken to consider the needs of pupils with known allergies and to minimise the risk of exposure to allergens.

Medication and Adrenaline Devices (ADs)

People at risk of anaphylaxis are normally prescribed two adrenaline auto-injectors. They should carry them at all times, including during the journey to and from school.

This includes the journey to and from;

- school,
- the classroom
- lunch area
- playground
- sports field
- when on visits or trips

Adrenaline Auto-Injectors and Emergency Equipment

Anaphylaxis is a time-critical medical emergency. Delays in administering adrenaline can increase the risk of a serious outcome. Where anaphylaxis is suspected, adrenaline should be administered without delay in accordance with the individual's Allergy Action Plan, Individual Healthcare Plan and staff training. National guidance advises that adrenaline auto-injectors should be readily accessible and capable of being reached quickly in an emergency.

Pupils who have been prescribed adrenaline auto-injectors (AAIs) are expected to carry, or have immediate access to, their own prescribed devices while at school, in line with their Allergy Action Plan or Individual Healthcare Plan. The school's spare devices provide additional emergency support and are not a replacement for a pupil's own prescribed medication.

Where a pupil is unable to carry their own devices, the school will agree suitable arrangements with the pupil and their parent/carer to ensure the devices remain clearly identified and readily accessible throughout the school day.

Adrenaline auto-injectors must be stored in accordance with the manufacturer's guidance. They should be kept at room temperature, protected from extreme heat and direct sunlight, and must not be refrigerated.

Spare Adrenaline Auto-Injectors

Under the Human Medicines (Amendment) Regulations, schools may purchase spare adrenaline auto-injectors without a prescription for emergency use. These devices may be used in accordance with current legislation, national guidance and the school's emergency procedures.

Allerton Grange School holds EpiPen 0.3mg (300 microgram) adrenaline auto-injectors as spare emergency devices. This strength is suitable for most secondary-aged pupils and adults and reflects current national guidance for the school's pupil population

The school's spare adrenaline auto-injectors are located in:

- Main School Office
- Sixth Form Centre Office

The devices are stored in clearly marked in RED Emergency Anaphylaxis Kits and are accessible to staff during the school day.

The Senior Leadership Team will ensure:

- Kits are checked in their nominated areas regularly to ensure devices remain present, accessible and in date.
- Ensuring the adrenaline solution remains clear and has not deteriorated.
- Arranging replacement devices before expiry or as soon as practicable following use.

Used devices will be handed to ambulance staff where appropriate or disposed of safely in accordance with the school's sharps and clinical waste procedures. Expired devices will be returned to a pharmacy or disposed of through the school's approved clinical waste arrangements.

Other Emergency Medical Equipment

In addition to the spare adrenaline auto-injectors, the school maintains emergency asthma kits and Automated External Defibrillators (AEDs) at key locations across the site.

Emergency asthma kits are located in:

- **Main School Office**
- **Sixth Form Centre Office**

AEDs are located in:

- **Main School Office**
- **Sixth Form Centre Office**
- **Staff Room (Wellbeing Desk)**
- **Technology Prep Room**

Staff are provided with information about the location of emergency medical equipment through induction, annual training and school emergency information notices.

Whilst emergency asthma kits and AEDs form part of the school's wider emergency medical provision, they are not a substitute for the immediate administration of adrenaline where anaphylaxis is suspected. Adrenaline remains the first-line treatment for anaphylaxis and should be given without delay.

In the event of a suspected anaphylactic reaction

- **Administer adrenaline as soon as possible.** Anaphylaxis is a time-critical medical emergency and delays in administering adrenaline can increase the risk of a serious outcome. Do **not** delay treatment whilst contacting emergency services. National guidance advises that adrenaline auto-injectors should normally be accessible within five minutes in an emergency.
- **Call 999 immediately** and state that anaphylaxis is suspected.
- **The individual should remain where they are**, unless there is an immediate danger. Adrenaline auto-injectors should be brought to them.

- **Where the individual has their own prescribed adrenaline auto-injectors, these should be used in the first instance.**
- The school's spare adrenaline auto-injectors are intended primarily for use where an individual has a known allergy and their own prescribed device is unavailable, inaccessible, expired, damaged, has misfired, or cannot otherwise be used without delay.
- Where an individual is not known to have an allergy, has not been prescribed an adrenaline auto-injector, or there is no Allergy Action Plan in place, staff should treat the situation as a medical emergency. Where anaphylaxis is suspected, staff should call for assistance, ensure that a spare adrenaline auto-injector is brought to the individual without delay, call 999 immediately and follow the advice of the emergency call handler. Any decision to administer a spare adrenaline auto-injector in these circumstances should be made in accordance with current legislation, emergency service advice, staff training and the circumstances of the incident.
- If there is no improvement after five minutes, a second adrenaline auto-injector should be administered if one is available and this is consistent with the individual's Allergy Action Plan and current emergency guidance.
- The individual must remain under supervision until emergency services arrive. Parents/carers should be informed as soon as reasonably practicable.
- If an individual experiences a life-threatening medical emergency, anyone, including staff, volunteers or bystanders, may take reasonable action to save life. The law recognises that individuals may need to act in emergency situations under significant pressure.

The Human Medicines (Amendment) Regulations 2017 permit schools to obtain and hold spare adrenaline auto-injectors (AAIs) for use in emergencies. The Regulations do not require parental consent for a spare AAI to be administered in an emergency. However, as a matter of good practice, the school will normally seek advance consent from parents/carers, or from the young person where appropriate, for the use of a spare AAI. In a genuine emergency, where anaphylaxis is suspected, immediate action should be taken and adrenaline administered without delay. A person providing emergency assistance may take reasonable action to preserve life or prevent serious injury.

Student self-management:

Depending on their age, understanding and ability to self-manage their condition, pupils may be encouraged to take responsibility for carrying their own prescribed adrenaline auto-injectors. Where agreed within the pupil's Individual Healthcare Plan (IHCP), and supported by advice from their healthcare professional, pupils should carry both of their prescribed adrenaline auto-injectors with them at all times whilst in school.

The devices should be kept in a clearly identifiable pouch, bag or case and remain on the pupil's person throughout the school day, including during lessons, social times, educational visits and other school activities.

Providing allergy awareness training and information for staff

Staff will receive appropriate allergy awareness information and training relevant to their role. The school will take reasonable steps to ensure supply, cover, coaching and peripatetic staff are provided with appropriate allergy awareness information.

Training may be delivered online, face-to-face or through a combination of methods and will be appropriate to the role of the member of staff.

Training will cover:

- allergy awareness and the risks associated with allergic reactions;
- recognising the signs and symptoms of allergic reactions and anaphylaxis;
- understanding the link between allergies, asthma and other related conditions;
- the location and use of emergency medication, including adrenaline auto-injectors and emergency asthma kits;
- the school's emergency response procedures;
- the importance of reducing exposure to known allergens;
- staff responsibilities under this policy;
- how to access and follow Individual Healthcare Plans (IHCPs), Allergy Action Plans and other relevant information; and
- how to record and report allergic reactions, incidents and near misses.

Relevant staff may also have opportunities to familiarise themselves with trainer adrenaline auto-injectors and other emergency equipment.

Emergency preparedness

Allerton Grange School may periodically review and practise its response to anaphylaxis with relevant staff. Any lessons learned will be used to improve training, procedures and emergency arrangements.

Allerton Grange School will communicate key messages regarding risk reduction leading up to festivals, trips and end of term celebrations.

During fire drills and lockdown practices, **Allerton Grange School** will seek to ensure that pupils who are expected to carry emergency medication have access to it during drills and emergency situations wherever reasonably practicable. Where emergency medication is not immediately available following an evacuation, arrangements will be made to retrieve replacement medication or otherwise ensure the pupil's safety before leaving the school's supervision.

Roles and Responsibilities:

The Governing Body is responsible for ensuring that the school has appropriate arrangements in place to support individuals with allergies, reduce the risk of exposure to known allergens and respond effectively to allergic reactions and anaphylaxis.

The Governing Body will receive assurance that appropriate allergy arrangements are in place and may review this policy periodically or sooner as required.

Allerton Grange School includes the risks pertaining to students and staff with allergy on the school’s risk register.

The Deputy Headteacher (Behaviour and Welfare) is the designated Senior Leadership Team lead for allergy safety and is responsible for overseeing the implementation and review of this policy.

The Deputy Headteacher and supporting Senior Leaders are responsible for:

- overseeing the implementation of this policy and supporting the school's allergy safety arrangements;
- maintaining oversight of pupils with significant allergies and associated healthcare documentation;
- supporting the development, review and communication of Individual Healthcare Plans (IHCPs) and associated risk assessments, where required;
- working with Year Teams, parents/carers, healthcare professionals and the catering provider to support pupils with allergies;
- ensuring allergy information is communicated appropriately to relevant staff on a need-to-know basis;
- overseeing arrangements for spare adrenaline auto-injectors, including routine checks and replacement of expired devices;
- promoting the reporting and review of allergy-related incidents and near misses;
- supporting staff training, induction and awareness relating to allergy safety and anaphylaxis; and
- contributing to the review of this policy and any associated procedures.

Senior leadership and oversight

The Deputy Headteacher (Behaviour and Welfare) is the designated Senior Leadership Team lead for allergy safety and is accountable for overseeing the implementation, monitoring and review of this policy.

The Deputy Headteacher is supported by the Key Stage Directors (Assistant Headteachers), Key Stage Leads, Year Teams and other identified staff, who coordinate and deliver allergy safety arrangements across the school.

Key Stage Directors and Key Stage Leads provide oversight and support to Year Teams, particularly where a pupil's medical needs are complex, high risk or require wider coordination. Significant or unresolved concerns will be escalated to the Deputy Headteacher (Behaviour and Welfare). This reflects the school's internal accountability structure.

Year Managers

Year Managers, supported by senior staff where appropriate, are responsible for:

- reviewing information received about a pupil's allergy and considering the support required;
- coordinating, implementing, reviewing and communicating Individual Healthcare Plans (IHCPs) and associated risk assessments;
- obtaining and appropriately sharing current clinical Allergy Action Plans provided by the pupil's healthcare professional;
- working with pupils, parents/carers, the Main Office, relevant staff and healthcare professionals to agree suitable arrangements;
- ensuring that relevant staff understand and implement the agreed arrangements;
- ensuring that records are current and stored appropriately; and
- escalating complex, high-risk or unresolved arrangements through the Key Stage Lead and Key Stage Director to the Deputy Headteacher (Behaviour and Welfare), where required.

Where available, Allergy Action Plans should normally be provided or endorsed by a healthcare professional. Individual Healthcare Plans are school-owned documents developed with the pupil, parents/carers and relevant staff, taking account of any healthcare advice received.

All Staff

Responsible for:

- understanding their role in implementing this policy, recognising signs of allergic reactions and acting swiftly in an emergency;
- Following and implementing relevant Individual Healthcare Plans (IHCPs), Allergy Action Plans and risk assessments, and supporting agreed control measures;
- creating an inclusive learning environment and avoiding unnecessary barriers to participation;
- making reasonable curriculum adaptations to minimise identified risks where required;
- completing risk assessments for curriculum activities involving food, educational visits, trips and sporting events where this forms part of their role;
- reporting allergy incidents, concerns and near misses promptly;

Parents:

Responsible for:

- Adhering to this policy
- Providing school with the information they need to create individual health care plans
- Updating school when reactions happen outside of school or any changes to the student's allergy and its management.
- Ensuring that the student always has in date medication with them at school

Identification of Individuals with Allergies

Data Collection: **Allerton Grange School** collects information regarding known allergies, dietary requirements and prescribed medication through admission forms, transition processes, healthcare documentation and direct communication with parents/carers. This information is reviewed and recorded in accordance with the school's medical information management procedures

Information Sharing: UK GDPR does not prevent the sharing of a pupil's health information (special category data). Relevant information will be securely recorded and shared, on a need-to-know basis, with appropriate staff, including teaching staff, support staff, supply staff and catering teams, where necessary to support the pupil's safety and wellbeing. All information will be handled in accordance with the school's data protection procedures

Transition: Allergy information and any existing healthcare documentation are reviewed as part of a pupil's transition to Allerton Grange School. Where information is available from previous schools, parents/carers or healthcare professionals, this will be considered when planning support arrangements. The school will work with parents/carers and, where appropriate, the pupil and relevant professionals to establish suitable arrangements and develop or review an Individual Healthcare Plan (IHCP) where required. Relevant information will be shared with staff involved in transition activities and preparations to support a safe and successful move into school.

Staff: Staff are asked to disclose any significant allergies or medical conditions through the school's recruitment and occupational health processes. Where support or adjustments are required, appropriate arrangements will be agreed to help ensure a safe working environment.

Visitors and regular volunteers: Where the school is made aware of a significant allergy, reasonable steps will be taken to support the individual and communicate any necessary information to relevant staff.

Student Individual Healthcare Plans (IHCPs) and Allergy Action Plans

Allergy Action Plans

- Where available, Allergy Action Plans are clinical documents provided by a healthcare professional, such as a GP, allergy nurse, specialist clinic or hospital team.
- They provide information about an individual's allergy, prescribed medication and the action to be taken in an emergency.
- The school will request a current Allergy Action Plan for pupils who are at risk of anaphylaxis and will use this information to inform school arrangements and Individual Healthcare Plans (IHCPs).
- Parents/carers are responsible for notifying the school of any changes to their child's allergy management and for providing updated medical information where available.
- Where appropriate, parents/carers and the school should ensure that any photograph used for identification purposes remains current.

Individual Healthcare Plans (IHCPs)

- Individual Healthcare Plans (IHCPs) are school-owned documents developed in partnership with parents/carers, the pupil (where appropriate) and relevant staff.
- IHCPs set out the practical arrangements required to support the pupil safely in school and should take account of any medical advice received.
- Where an Allergy Action Plan is available, it will be attached to or referenced within the IHCP.
- It is good practice to review IHCPs annually or when staff change, however they must be reviewed if an incident or near miss occurs

Allergy Action Plans and Anaphylaxis

- Allergy Action Plans are typically used for pupils who are at risk of anaphylaxis, including those with certain food, insect venom or medication allergies.
- Not all allergies require an Allergy Action Plan. The level of support and documentation required will depend on the nature and severity of the allergy and the associated risks.

Allerton Grange School will ensure that:

- pupils with an Allergy Action Plan and/or an asthma plan have an Individual Healthcare Plan (IHCP) where support, monitoring, emergency arrangements or reasonable adjustments are required in school;
- pupils without an Allergy Action Plan or asthma plan, but who have an allergy requiring support or management beyond that normally provided to other pupils, will have an IHCP where appropriate;

- an IHCP may be developed while a pupil is awaiting diagnosis, further medical advice or formal clinical documentation, where this is necessary to support their safety and wellbeing in school.

School Trips and External Visits

Allerton Grange School is committed to ensuring that pupils with allergies are able to participate fully in educational visits, sporting events and extracurricular activities wherever it is safe and reasonable to do so.
Trip leaders will consider any known allergies as part of the visit planning process and existing visit risk assessment arrangements. Where a pupil's allergy presents an increased risk, additional control measures and, where appropriate, an individual risk assessment will be put in place.

Relevant information from the pupil's Individual Healthcare Plan (IHCP), Allergy Action Plan and any associated risk assessments will be considered when planning visits and activities.

Trip leaders will ensure that any required emergency medication is available and accessible throughout the visit and will check, where appropriate, that pupils who are expected to carry their own medication have it with them before departure.

Where a pupil's prescribed medication is unavailable and safe arrangements cannot be maintained, the school will consider whether participation in the activity remains appropriate.

In consultation with the Deputy Headteacher and associated Key Stage Senior Leader link, trip leaders will consider whether the school's spare adrenaline auto-injectors should accompany the visit. This decision will be based on the nature of the activity, the needs of the pupil(s) involved and the availability of prescribed medication.

Where additional emergency medication is taken on a visit, arrangements will be made to ensure that emergency provision remains available for pupils remaining on site.

Sport Fixtures
Where a pupil has a severe allergy or a condition requiring emergency medication, the visit or fixture leader will ensure that relevant allergy information, emergency arrangements and medication requirements are communicated to the host organisation where necessary.

Where food or refreshments are provided, the organiser will ensure that allergy information is shared in advance and that suitable arrangements are confirmed.

The trip or fixture risk assessment will identify any additional controls required, including access to prescribed medication, emergency contact arrangements, supervision requirements and the availability of emergency services if needed.

The pupil's prescribed adrenaline auto-injectors should accompany them to all fixtures, visits and off-site activities. Staff must know who is carrying the medication and how it can be accessed without delay.

Serious Incidents and Near Misses

Allerton Grange School adopts a learning and improvement approach to allergy-related incidents and near misses. The aim is to understand what happened, identify any necessary improvements and reduce the likelihood of recurrence.

Where appropriate, materials such as food packaging, food residues or other relevant items may be retained to assist with any investigation.

All allergic reactions, suspected allergic reactions and near misses (for example accidental exposure without reaction, incorrect allergen information or medication not being readily available) will be recorded promptly using CPOMS and reviewed by the appropriate staff.
Following an incident or near miss, the school will:

- review the circumstances of the incident;
- identify any lessons learned and actions required;
- consider whether any existing control measures, procedures or training arrangements need to be updated;
- review any relevant Individual Healthcare Plans (IHCPs), Allergy Action Plans or risk assessments; and
- ensure any agreed actions are implemented and monitored.

Where appropriate, the school will discuss the incident with the pupil and their parents/carers and seek their views as part of the review process. The school will share relevant outcomes and any actions being taken as a result of the review, whilst respecting confidentiality and data protection requirements.

If food provided by the school's catering provider is believed to have contributed to an incident, the matter will be investigated and escalated appropriately in line with food safety and contractual arrangements.

Where there are safeguarding concerns arising from an incident, these will be managed in accordance with the school's safeguarding procedures.

Wellbeing and Support

Allerton Grange School recognises that living with an allergy can cause anxiety for some pupils, particularly where there is a risk of anaphylaxis or where allergies are accompanied by other medical conditions such as asthma or eczema. The school is committed to supporting pupils with allergies so that they can participate fully in school life.

Allerton Grange School will:

- promote awareness of allergies and anaphylaxis through staff training, communications and, where appropriate, the curriculum;
- seek to ensure that school activities, celebrations and events are planned with due regard to the needs of pupils with known allergies;
- take all concerns relating to allergy-related bullying, teasing or discrimination seriously and address them in accordance with the school's Behaviour and Anti-Bullying Policies;
- work with pupils, parents/carers and relevant professionals to support pupils with allergies and reduce unnecessary barriers to participation;
- provide appropriate information and support to pupils and families during transition and admission processes; and

- regularly review allergy arrangements and consider feedback from pupils, parents/carers and staff where appropriate.

Safeguarding:

Allerton Grange School recognises that allergy-related concerns may, in some circumstances, give rise to safeguarding concerns. This may include situations where a pupil is repeatedly placed at risk because essential medical information, medication or support arrangements are not provided, or where there are concerns that a pupil's health, safety or wellbeing may be compromised.
The school will consider each situation on its individual merits and, where appropriate, manage concerns in accordance with the school's safeguarding procedures. Concerns will be assessed proportionately and in the context of the information available at the time.

Unacceptable practice

Allerton Grange School expects staff to follow this policy and the arrangements set out within Individual Healthcare Plans (IHCPs), Allergy Action Plans and risk assessments.

The school will not:

- prevent pupils from accessing prescribed emergency medication in accordance with their Individual Healthcare Plan;
- create unnecessary barriers to participation in learning, trips, visits, sport or other school activities because of an allergy;
- require parents/carers to attend school to administer emergency medication or provide support that the school can reasonably provide;
- disregard relevant medical advice, agreed healthcare plans or identified risks.

The school will take account of the views of pupils, parents/carers and relevant healthcare professionals when developing support arrangements. However, the school retains responsibility for determining the arrangements that can reasonably be implemented within the school environment, having regard to the needs of the pupil, available medical advice, staffing, resources, health and safety considerations and the operation of the school as a whole.

Policy Review and Publication

This policy is published on the school website and will be reviewed internally annually, or sooner where required following significant incidents, changes in guidance or changes in legislation.

References and Guidance

This policy has been developed with reference to:

- Department for Education: Allergy Safety in Schools
- Department for Education: Supporting Pupils at School with Medical Conditions
- Department of Health and Social Care: Guidance on the Use of Adrenaline Auto-Injectors in Schools
- Anaphylaxis UK: Education Resources

- Allergy UK: Allergy Information and Guidance

Be Allergy Aware & Save a Life

Anaphylaxis is a serious and life-threatening reaction to allergens such as food, insect stings, medication and latex.

In the event of a serious allergic reaction, time is critical.

What to do in an emergency

Get in position

Lay the person flat and raise their legs - do NOT allow them to stand or walk.

- If unconscious, place them in the recovery position
- If breathing is difficult, they can be propped up with legs stretched out straight

Give adrenaline immediately

Administer adrenaline without delay (use prescribed AAI or intranasal EURneffy) Refer to device label for instructions.

- Note the time that the first dose of adrenaline is given
- ALWAYS carry two in-date adrenaline devices, as a second dose may be needed

Call 999

Call emergency services immediately and tell the operator it is "anaphylaxis"

(ana-fil-ax-is)

Give your exact location (What3Words can help if you are outside).
Stay with the person until emergency services arrive.

Do not move

Stay lying flat or propped up until help arrives. Do not stand up, walk or run, even if you start to feel better. Movement can make symptoms worse and cause a sudden drop in blood pressure.

Give second dose of adrenaline

5 min

If symptoms don't improve after five minutes, or symptoms get worse, a second dose of adrenaline can be given.

Recognise the ABC symptoms and act quickly - you could save a life.

Symptoms of anaphylaxis

A Airway

Swelling in the throat, tongue or upper airways, hoarse voice, difficulty swallowing

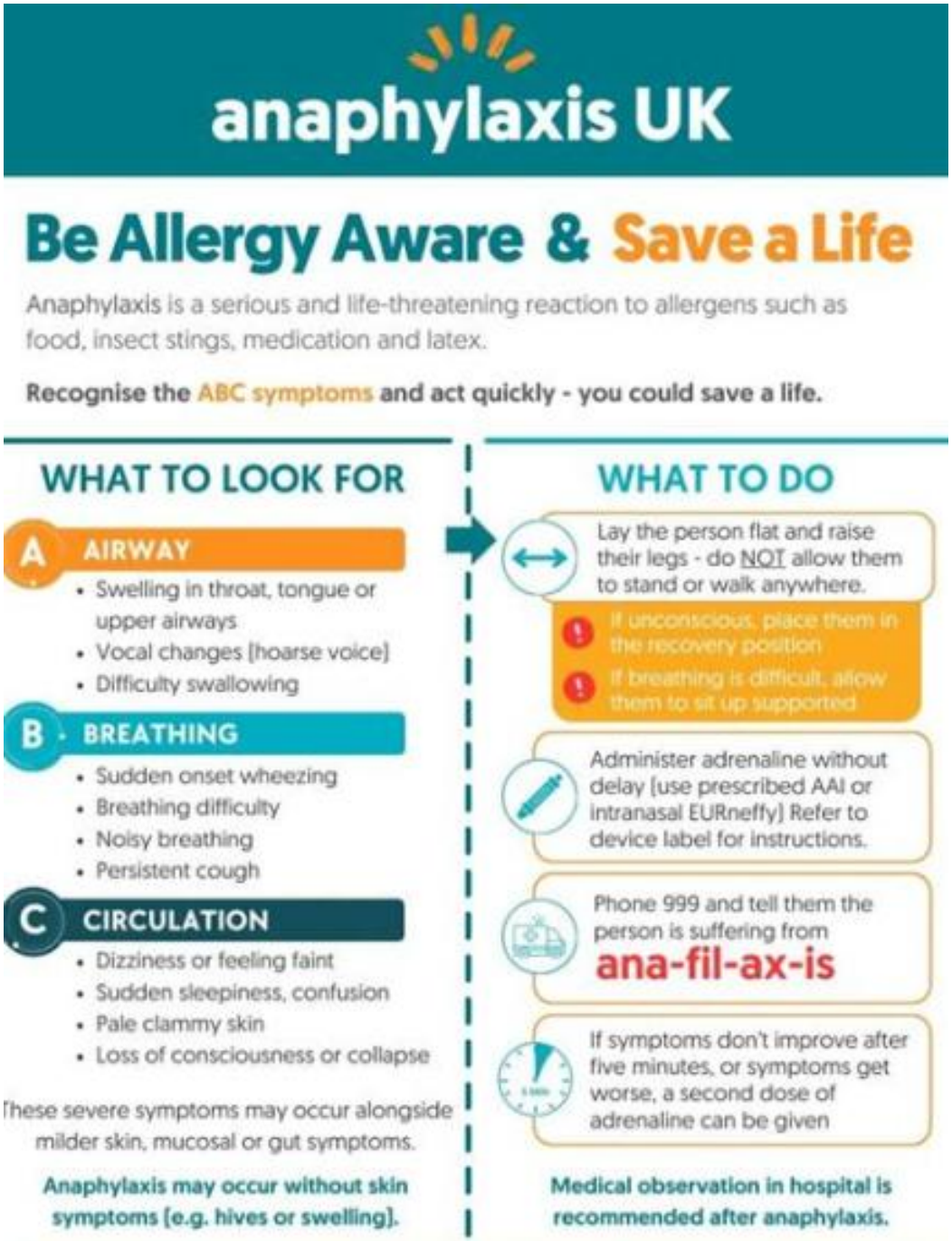
B Breathing

Sudden onset wheezing, breathing difficulty, noisy breathing, persistent cough

C Circulation

Dizziness, feeling faint, sudden sleepiness, confusion, pale clammy skin, loss of consciousness or collapse

These severe symptoms may occur alongside milder skin, mucosal (mouth/nose/throat), or gut symptoms.


anaphylaxis UK
Be Allergy Aware & Save a Life
Anaphylaxis is a serious and life-threatening reaction to allergens such as food, insect stings, medication and latex.
Recognise the ABC symptoms and act quickly - you could save a life.
WHAT TO LOOK FOR
A AIRWAY
• Swelling in throat, tongue or upper airways
• Vocal changes (hoarse voice)
• Difficulty swallowing
B BREATHING
• Sudden onset wheezing
• Breathing difficulty
• Noisy breathing
• Persistent cough
C CIRCULATION
• Dizziness or feeling faint
• Sudden sleepiness, confusion
• Pale clammy skin
• Loss of consciousness or collapse
These severe symptoms may occur alongside milder skin, mucosal or gut symptoms.
Anaphylaxis may occur without skin symptoms (e.g. hives or swelling).
WHAT TO DO
Lay the person flat and raise their legs - do NOT allow them to stand or walk anywhere.
If unconscious, place them in the recovery position
If breathing is difficult, allow them to sit up supported
Administer adrenaline without delay (use prescribed AAI or intranasal EURneffy) Refer to device label for instructions.
Phone 999 and tell them the person is suffering from
ana-fil-ax-is
If symptoms don't improve after five minutes, or symptoms get worse, a second dose of adrenaline can be given
Medical observation in hospital is recommended after anaphylaxis.