



The Horsell Village School

Allergy Policy

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Anaphylaxis is a serious, life threatening allergic reaction. The whole body is affected, often within minutes of exposure to an allergen, but sometimes it can be hours later.

The Horsell Village School is committed to promoting a whole school approach to healthcare, welfare and well-being and the safe management of those members of our school community who live with allergies. We believe allergies should be taken seriously and dealt with in a professional and appropriate way.

This policy sets out how The Horsell Village School will support pupils and staff to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

Aims

This policy aims to:

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

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on [allergy safety in schools](#) and [supporting pupils with medical conditions at school](#), the Department of Health and Social Care's guidance on [using emergency adrenaline auto-injectors in schools](#), and the following legislation:

- [The Food Information Regulations 2014](#)
- [The Food Information \(Amendment\) \(England\) Regulations 2019](#)

3.Roles and responsibilities

3.1 The governing board

The governing board is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed.
- The school has an allergy safety policy which sets out:
 - Arrangements to reduce the risk of individuals coming into contact with their known allergens.
 - Emergency response plans for cases of anaphylaxis

The governing board delegates the day-to-day implementation of this policy to the Allergy Safety lead.

3.2 Allergy Safety Lead

The nominated allergy safety leads are **Jane Reeve** and **Laura Sharkey**

They are responsible for:

- Implementing this allergy safety policy
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published.
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (ADs)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff.
- All pupils who require support with allergies have an up-to-date individual healthcare plan (IHP)
- All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional.
- All staff receive regular allergy awareness training.
- All staff are aware of the school's policy and procedures regarding allergies.
- Relevant staff are aware of what activities need an allergy risk assessment.
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
 - What lessons there are to learn
 - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP

3.3 The Headteacher

The headteacher is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

3.4 Front of House / Admissions is responsible for:

- Checking spare AAls are present and in date, monthly.
- Making sure that replacement AAls are obtained when expiry dates approach.
- Asking parents, at the start of each year, to complete care and treatment plans, update them, review or sign to acknowledge changes / no changes.
- Ensuring copies of treatment plans are kept with AAls (a copy in the school office and copy for class teachers).

3.5 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils.
- Maintaining awareness of our allergy safety policy and procedures.
- Being able to recognise the signs of severe allergic reactions and anaphylaxis.
- Being aware of specific pupils with allergies in their care.
- Reducing the risk to pupils with known allergies coming into contact with known allergens.
- Ensuring the wellbeing and inclusion of pupils with allergies.
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead.
- Writing risk assessments for activities that may pose a potential risk. In addition, any food related activities must be carefully supervised, and a risk assessment must be completed beforehand to ensure the safety of all pupils.
- Complete in-person anaphylaxis training. Training is provided for all staff on a yearly basis and an ad-hoc basis for new members of staff.
- Staff leading school trips, educational visits, or workshops involving pupils, whether off site or hosted in school, must complete an individual risk assessment at least 48 hours prior to the activity taking place.

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of the school's allergy safety policy.
- Following the school's guidance on the food brought into school (nut awareness).
- Informing the school of any allergies. Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions, and anaphylaxis when their child joins the school.
- Updating the school on any changes to their child's condition.
- Providing a copy of their child's Allergy Action Plan to the school. If they do not have one, it should be created as soon as possible in collaboration with a healthcare professional, and the Anaphylaxis Healthcare Plan should be completed.
- If required, providing their child with two in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner.

3.7 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Begin to recognise foods, substances or situations that may trigger an allergic reaction.
- Tell a member of staff immediately if they feel unwell, think they have come into contact with an allergen, or are worried about a possible allergic reaction.

- Follow guidance from school staff regarding allergy management and safe practices.
- Develop an awareness of their allergy and, where appropriate, understand that their medication is available to help keep them safe.

3.8 Pupils without allergies

These pupils are responsible for:

- Being aware that some foods and substances can be harmful to their peers.
- Follow school rules relating to food, allergies and handwashing.
- Show consideration for classmates with allergies and help to create a safe and inclusive environment.
- Tell a member of staff immediately if they are worried about a friend who appears unwell or who may have come into contact with an allergen.

4. Identifying individuals at risk

Allergies are a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mites, animal fur/feathers, or mold.
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals.
- Food allergies, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis.
- Asthma, which may be triggered by airborne allergens.
- Allergy to insect stings and medicines.

4.1 Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. We will invite parents and carers to school to complete a school-based care plan in addition to care plan produced by a professional health care provider (ie: doctor / hospital)
- Where a pupil has a new diagnosis and/or has moved to the school mid-term, send a form and put arrangements in place before they start and complete a school-based care plan in addition to care plan produced by a professional health care provider (ie: doctor / hospital)
- Send a reminder to parents/carers at the start of each year asking them to update their child's medical information as necessary.
- We ask that parents/carers proactively inform us by an email to reception@horsell-village.surrey.sch.uk if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

All staff & visitors to school will:

- Be asked to provide details of their allergies in advance of their start date (staff) and care plans will be created.
- Planned visitors will be asked to provide details of their allergies in advance of their visit.
- Daily visitors / volunteers will be asked to declare any allergies on arrival.

4.3 Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment.
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally. It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.
- The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are in place before children start school.
- Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the pupil while they are at school or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The headteacher is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves to a new school or college, their IHP will be shared as part of the transition.

4.4 Allergy and asthma action plans

- All pupils and staff who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.
- All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack. The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Register of pupils with known allergies

The school maintains a register of pupils who have a known allergy. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed ADs (and if so, what type and dose)

- Where a pupil has been prescribed an AD, whether parental consent has been given to administer emergency medication
- A photograph of each pupil to allow a visual check to be made (this will require parental consent)
- The register is kept easily accessible to staff and can be checked quickly by any member of staff as part of initiating an emergency response

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking
- A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

6. Minimizing risk

The Horsell Village School is committed to ensuring children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so they can play a full and active role in school life, remain healthy and achieve their academic potential.

6.1 Catering

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

- Catering ensure catering staff receive appropriate training and are able to identify pupils with allergies. Certificates are shared directly with the school.
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers
- In the rare cases changes are made to school menus, we will make sure these comply with legislation, and continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all [legal requirements](#) that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Where food is provided by the school, staff will understand how to read labels for food allergens Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination
- Children with identified allergies wear a yellow plastic bracelet in the canteen. This is a visual sign for all staff in the canteen to be allergy aware.
- Parents inform the catering company in addition to informing the school of allergy needs.

6.3 Insect bites/stings

Procedures for preventing and dealing with insect bites/stings.

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- Care plans followed and implemented for those with known allergens

- Parents contacted for all pupils if insect bite / sting occurs

6.4 Visits and trips

- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis and asthma attacks taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs with them. These are carried by their adult group leader. This will be a member of staff unless the child's parent is accompanying.
- Pupils with asthma will have their inhalers with them. These are carried by their adult group leader. This will be a member of staff unless the child's parent is accompanying.
- Staff trained to administer adrenaline / inhalers in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AD protocols and inhalers for off-site events and school trips (see section 8.5)
- Spare emergency ADs and inhalers will accompany school trips off site. These will be carried by the visit leader.

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately.
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
 - The pupil does not have a prescribed AD
 - The pupil's prescribed AD are not available or misfire

Procedures for handling an asthma attack

- All staff are trained to recognise the sign of both mild and severe asthma attacks.
- Staff are trained in the administration of inhalers to minimise delays in an emergency
- If the pupil has an asthma action plan, this must be followed
- A spare school inhaler will be only used if:
 - The pupils prescribed inhaler is not available or is misfiring / not working

8. Supply, storage and care of medication

8.1 Prescribed ADs & Inhalers

ADs are stored:

- In two central locations across school. These locations are known to all staff and are clearly labelled. All ADs are stored in individual containers for each child. This has the child's name and picture clearly labelled on the front.
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

Inhalers are kept in the school office for use as and when needed.

8.2 Spare ADs and inhalers

Spare ADs and inhalers are kept on site for emergencies and are clearly labelled.

The Allergy Safety Lead is responsible for sourcing spare ADs and an emergency asthma reliever inhaler and ensuring they are stored according to the guidance.

Spare ADs will be stored:

- In the school canteen
- At the school office
- In an emergency grab bag
- At room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- In pairs, in case a second one is necessary
- In a separate container from any pupils' prescribed ADs and clearly labelled to avoid confusion

Spare inhalers are kept in the school office

Front of house are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliever inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near.
- Obtaining replacement inhalers when the expiry date is near.

8.3 Disposal

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

8.4 Using spare ADs in an emergency situation without prior consent

The [Human Medicines \(Amendment\) Regulations 2017](#) do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

9.1 Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a pupil aged up to 16 will be notified of the incident or 'near miss' as soon as possible.

The school will share the report with the pupil's parents, the pupil or the individual involved. They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with Mrs Jane Reeve or Mrs Laura Sharkey. The Allergy Safety Lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See [how to make a RIDDOR report](#)]
- In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

The Horsell Village school ensures that all staff completes allergy awareness and anaphylaxis training and asthma awareness training annually and on a ad-hoc basis during induction of new staff.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at

breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school will conduct allergy safety drills termly. This is a simulated case of anaphylaxis or asthma attack to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that 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 the emergency services and informing parents/carers
 - How to locate and administer emergency medication
 - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')

10.2 Awareness of allergy safety policy

This allergy safety policy is published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

11. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

12. Monitoring arrangements

This policy will be monitored by the allergy safety lead.

It will be reviewed and approved annually by the allergy safety lead, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

13. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- School food policy
- Data protection policy
- Behaviour policy