

MANOR ROAD PRIMARY SCHOOL



ALLERGY SAFETY POLICY

September 2026





Manor Road Primary School

Allergy Safety Policy

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Manor Road Primary School

Allergy Safety Policy

INTRODUCTION

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include food, insect stings and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC Symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything that contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK allergens include, but are not limited to: peanuts, tree nuts, sesame, milk, egg, fish, latex, insect venom, pollen and animal dander.

AIMS

This policy aims to:

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

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](#)

ROLES AND RESPONSIBILITIES

The Governing Board

The Governing Board is responsible for ensuring:

- Risks relating to pupils with allergy are 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.

Allergy Safety Lead

The nominated Allergy Safety Lead at Manor Road Primary School is Karen Marshall.

The Allergy Safety Lead is responsible for:

- Implementing the school's 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 auto-injectors (AAIs)
- Ensuring:
 - All allergy information is up to date and readily available to relevant members of staff
 - All children who require support with allergies have an up-to-date Individual Healthcare Plan (IHP)
 - All children with a known food or insect sting allergy have up-to-date Allergy Action Plan if one has been 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 Supporting Children with Medical Conditions in School Policy and / or Allergy Safety Policy and / or to any child's IHP

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.

Named Staff

Elaine Haworth and Karen Marshall are responsible for:

- Maintaining up-to-date medical records for pupils and staff, where appropriate
- Checking spare AAIs are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach

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

Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety 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
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

Pupils With Allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AAIs on their person and only using it for its intended purpose
- Understanding how and when to use their AAI

Pupils Without Allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Adhering to the school rules on not sharing food at break, lunchtimes etc.

IDENTIFYING INDIVIDUALS AT RISK

Allergy is 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 mite, animal fur/feathers, or mould
- 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 allergy, 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

Identifying pupils at risk

At Manor Road Primary School:

Reception New Intake and In-Year Admissions

- All parents of new starters, including Pre-School, Reception new intake and in-year admissions, are sent a Pupil Data Collection Form which includes a request for any medication or dietary information. This form is sent via ParentMail and responses are monitored.
- If this form indicates either a medical condition or dietary requirement, a further more specific Medical Conditions Form is then sent via ParentMail and responses are monitored.
- If the medical condition or dietary requirement indicates an allergy of any type, the parent is contacted and discussion takes place to determine the level of the allergy and whether there is a risk of anaphylaxis; an informed decision will then be taken whether the child needs an Individual Healthcare Plan (IHP).
- If an IHP is required, school will liaise with the parent and any relevant medical professionals to write a bespoke IHP. The draft IHP will be shared with the parent who must then confirm that it is suitable or request changes.
- All IHPs are reviewed towards the end of the academic year and updated as required in time for the start of the new academic year; they are also updated when a parent provides new information about their child's condition, eg. a new allergy or

increase in medication dose. A child's IHP will also be reviewed following any incident or 'near miss' to ensure that it remains effective.

- Paper copies of IHPs are in the child's class and all relevant staff are required to read them and be aware of the child's allergens, signs and symptoms of a reaction and the location of any medication which may be required.
- Paper copies of all IHPs are shared with Carol Atkinson, who holds a current First Aid at Work qualification; they are also shared with Luke Atkinson for reference in any sporting provision.
- Details of the medical condition will be recorded on the school's Medical Condition List. Master copies of this list are stored in the school office and copies are shared with:
 - The child's class
 - The school's FAW
 - The school Cook (where the allergy or dietary requirement is linked to food)
 - All Lunchtime Staff
 - The school's Sports Co-Ordinators
 - Out of School Club
- Relevant medical information will be shared with peripatetic sports providers as appropriate.
- Parental consent for a photograph of their child to be displayed in school is sought and these are used on the school's Medical Requirements and Dietary Requirements lists along with details of the medical condition or dietary requirement, signs and symptoms and any treatment. Copies of these lists are shared as above and also on display in the Staff Room.

In-Year Diagnosis

If a parent notifies school during the academic year that their child has been diagnosed with a medical condition, the above procedure will be followed and the Medical Conditions List updated.

Reminders

We ask that parents / carers are proactive in informing the school if their child's medical or dietary needs change during the school year, or if there are any changes to medication, eg. a higher dose.

A reminder is included in the first newsletter of each term asking parents to update any medical or dietary information as necessary.

Identifying staff and visitors at risk

Staff

At Manor Road, all staff are asked to provide the Headteacher and School Business Manager with any relevant medical information, including known allergies, on appointment.

Staff are also requested to share any diagnoses they may receive after appointment if relevant.

If a medical condition may result in treatment being needed whilst at school which would involve seeking assistance, eg. from the FAW, consent is sought for the sharing of this information with relevant parties.

If a member of staff has an allergy to a specific food, consent is sought to share this with all staff, including the use and location of any AAls. In some cases, consent may also be sought to share the information with parents, eg. if a Teacher or Teaching Assistant in a specific class has an allergy to any foods which may be brought in by children for snacks. A decision will be made whether it is necessary to share the individual staff member's name or whether a reference can just be made to a specific class on a case-by-case basis by the Headteacher and the member of staff involved.

Visitors

At Manor Road, all visitors are required to sign in using the electronic system; they will be prompted by this system to inform the office staff of any allergies which may result in the need for emergency medical treatment.

If a visitor informs school that they carry an AAls, they will be asked where this can be found in the event of an emergency.

Individual Healthcare Plans (IHP)

Children 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 child 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 child. At Manor Road, we use the template IHP published by the Department for Education.

The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for children who are new to our 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
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the child's needs have changed. At Manor Road, All IHPs are reviewed towards the end of the academic year and updated as required in time for the start of the new academic year; they are also updated when a parent provides new information about their child's condition, eg. a new allergy or increase in medication dose. A child's IHP will also be reviewed following any incident or 'near miss' to ensure that it remains effective.

Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

Allergy and Asthma Action Plans

All children 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 children 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.

Register of Children 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 AAls (and if so, what type and dose)
- Where a pupil has been prescribed an AAls, 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)

Copies of the register are kept in the following areas and can be checked quickly by any member of staff as part of initiating an emergency response:

- All classrooms
- The School Office
- The Headteacher's Office
- The FAW Person (Carol Atkinson)
- The Sports Co-Ordinators (Carol Atkinson and Luke Atkinson)
- The Dining Hall
- The School Kitchen

ASSESSING RISK

The school will conduct a risk assessment for any child 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 child at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

Manor Road Primary School will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping children with allergies safe. See Appendix 2.

MINIMISING RISK

At Manor Road:

- Children are instructed to wash their hands before going for lunch
- Children are given regular reminders not to share food with other children
- Children bring in their own named water bottles
- Children who have packed lunches bring them to school in named containers
- Children in Years 1 – 6 bring in their own snacks from home
- Snacks are provided for children in Pre-School and Reception Classes; all allergies are taken into account when providing these snacks and alternatives are provided for children where required
- Regular reminders are given to parents that we are a Nut Free School and they must not send in any foods containing nuts or nut products
- If a child has an allergy to a specific food, parents of all children in that class are asked not to send in any foods containing that food, eg. kiwi, sesame etc.

Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies. At Manor Road, catering staff are under the employ of Lancashire County Council and follow the guidance provided by the council; this includes:

- Catering staff receive appropriate training and are able to identify pupils with allergies – at Manor Road, the kitchen are supplied with photographs of any child with a food allergy, along with details of symptoms and any treatment. Copies of IHPs are also shared with the school cook
- 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. At Manor Road, parents of children with food allergies are encouraged to speak directly with our Cook who will advise on the procedures in place to ensure children are provided with food which is safe for them.
- 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

Insect bites/stings

At Manor Road, there are a large number of staff trained to Level 3 Paediatric First Aid who are able to provide appropriate treatment for insect bites or stings. Any child who is bitten or stung by an insect is monitored for anaphylaxis.

Animals

- Careful consideration of any children with allergies will be given before organising any activities involving animals.
- Staff refer to the specific Bringing Animals in to School risk assessment when planning any activity involving animals
- All children and staff will always wash hands after interacting with animals to avoid putting children with allergies at risk through later contact
- Children with animal allergies will not interact with animals

Visits and Trips

- No child with allergies will be excluded from taking part in school visits and trips
- 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 with an at risk of anaphylaxis taking part in a school trip, see Appendix 3
- Children at risk of anaphylaxis should have their own AAI with them; at Manor Road, a named member of staff on the trip will carry the child's AAI and will stay close to the child at all times during the visit or trip

- Staff trained to administer adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AAI protocols for off-site events and school trips (see 'Use of AAI Off School Premises below)

PROCEDURES FOR HANDLING AN ALLERGIC REACTION

At Manor Road:

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately. See Appendix 1
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an IHP and/or an Allergy Action Plan, this must be followed
- A spare school AAI device will only be used if:
 - The pupil does not have a prescribed AAI
 - The pupil's prescribed AAIs are not available or misfire
- Where appropriate, the assistance of the school's FAW will be sought
- In the event of an AAI being administered, the Headteacher will be informed and an ambulance called without delay
- The child's parents will be contacted and requested to attend school without delay
- The child will be monitored until the ambulance arrives and care will then be handed to the attending paramedics

ADRENALINE AUTO-INJECTORS (AAIs)

Prescribed AAI

At Manor Road:

- All prescribed AAI will be kept in a named container in the child's class, in a location that is unlocked and accessible at all times
- A copy of the child's Allergy Action Plan is kept in the container along with the medication; this plan must be followed in the event of an emergency
- All AAI are kept at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extremes of temperature
- If a child has a prescribed AAI, there will be a named member of staff responsible for carrying the AAI on any visits or trips organised by school. This member of staff will stay close to the child at all times during the visit or trip
- In most cases, prescribed AAI will remain in school; if a parent requests to take their child's AAI home for any reason, they are responsible for ensuring this is returned to school every day and handed to a member of staff in the school office
- It is the parent's responsibility to check that their child's AAI and any other medication required remains in date; however, office staff carry out monthly checks on all medication kept in school and, should any medication be due to expire, the parent will be informed by Dojo message and requested to bring in new medication.
- A list is kept of all pupils who have IHPs and / or Allergy Action Plans and this includes where an AAI has been prescribed. This list is kept in the school office

alongside copies of all IHPs, the Headteacher's Office, the FAW Person (Carol Atkinson), the Sports Co-Ordinators (Carol Atkinson and Luke Atkinson), the Dining Hall and the School Kitchen

- This information is also recorded on the school's Medical Conditions List - see page 7 of this policy for details.

Spare AAI's and Inhalers

The Allergy Safety lead is responsible for sourcing spare AAI's [and an emergency asthma reliever inhaler] and ensuring they are stored according to the guidance.

At Manor Road, we have 2 spare EpiPens which are sourced from Selles Medical. One EpiPen is 0.15mg and the other is 0.3mg.

The spare EpiPens are stored in the school office and are accessible to staff at all times. They are kept separate from any child's prescribed ADs, in a clearly labelled box, to avoid confusion.

They are kept at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extremes of temperature.

Karen Marshall and Elaine Haworth are responsible for:

- Checking that spare AAI's and the emergency asthma reliever inhaler are present and in date on a monthly basis
- Obtaining replacement AAI's and emergency asthma reliever inhaler when the expiry date is near.

Disposal

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

Using spare AAI's 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. In an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

Use of AAI's Off School Premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own AAI's with them on school trips and off-site events. At Manor Road, this decision will be taken based on knowledge of the child's ability to do this and, in most cases, AAI's will be carried by a named member of staff who will stay in close proximity to the child.

If a child with a prescribed AAI is taking part in a school sporting event off site during the school day, the Sports Co-Ordinator will ensure that a named adult is responsible for taking the child's AAI's with them and returning them to the correct location on return to school. In some cases where parents are spectating, they may also be carrying the child's AAI's from home, but this must not be presumed.

One spare AAI will be taken for emergency use on school trips and responsibility for this lies with the lead adult for any trip. They are also responsible for returning the AAI to the school office immediately on return from the trip.

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.

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 on CPOMS if it relates to a child and in the relevant HR file if it relates to a member of staff and will include 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.

Incident reporting

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

The school will share the report with the pupil's parents, the child 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 child is at home. This means that incident reporting is not limited to

staff – the child, 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 the Headteacher.

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 child'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.

ALLERGY AWARENESS

Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction. At Manor Road, staff access the allergy awareness training via the School Nursing Team.

The school will conduct an annual allergy safety drill. This is a simulated case of anaphylaxis 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 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')

Awareness of Allergy Safety Policy

This Allergy Safety Policy will be 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.

School will use resources from [Allergy School](#) to teach pupils about allergies an age-appropriate level.

ALLERGY AWARENESS AND NUT BANS

Manor Road Primary School understands the approach advocated by Anaphylaxis UK towards nut bans / nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

However, we do consider our school to be a Nut Free School and ask that children do not bring in any food containing nuts.

We also highlight a 'whole school awareness of allergies' approach, as it ensures teachers, pupils and other staff are aware of what allergies are, the importance of avoiding the pupil's allergens, the signs and symptoms, how to deal with allergic reactions and to ensure that policies and procedures are in place to minimise risk.

WELLBEING

Pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy. At Manor Road, pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis

The school will respond to an instance of bullying in line with its Behaviour & Relationships Policy.

Wellbeing Support Following an Incident or 'Near Miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the pupil but their family, those involved in responding, and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See page 14 of the policy for more detail on incidents and 'near misses'.

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.

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.

LINKS TO OTHER POLICIES

This policy links to the following policies and procedures:

- Health & Safety Policy
- Supporting Pupils with Medical Conditions Policy
- Data Protection Policy
- Behavior & Relationships Policy

POLICY REVIEW DETAILS		
Policy written by	Karen Marshall	June 2024 Based on model policy from Anaphylaxis UK as advised by LCC in 'Guidance for Education Providers – Allergens'
Policy Reviewed	Karen Marshall	September 2026 Based on model Policy from The Key in response to new DfE 'Supporting Children and Young People With Medical Conditions and Allergy' Statutory Guidance (draft March 2026)
Review schedule	Annual	

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 urticarial) anywhere on the body
- A tingling or itchy feeling in the mouth
- Swelling of the lips, face or eyes
- Stomach pain or vomiting

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
- **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.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly.

Adrenaline is the mainstay of treatment and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

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

Action:

- Keep the child where they are, call for help and do not leave them unattended
- **LIE THE CHILD 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 AUTO-INJECTOR WITHOUT DELAY** and note the time given. AAls should be given into the muscle in the outer thigh. 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 AAI
- If no signs of life, commence CPR
- Call the child's parent / carer as soon as possible

Whilst you are waiting for the ambulance, keep the child 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.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.



MANOR ROAD PRIMARY SCHOOL

Anaphylaxis Risk Assessment



This form should be completed by the setting in liaison with the parents/carers and the child, if appropriate. It should be shared with everyone who has contact with the child/young person.

Child/Young Person Name:	Date of Birth:
Setting: Manor Road Primary School	Teacher/TA:
Phase: Primary	
Name and role of other professionals involved in this Risk Assessment (i.e. Specialist Nurse or School Nurse):	
Date of Assessment:	Reassessment due (this would usually be annually, unless there is an incident, at which point the risk assessment should be reviewed):
I give permission for this to be shared with anyone who needs this information to keep the child/young person safe: Signatures: Setting Manager/Head teacher: Date Parents/Carers Date Child/Young Person Date	
What is this child/young person allergic to? Allergen exposure risks to be considered Ingestion ☐ Direct contact ☐ Indirect contact ☐	
Does this child already have an Allergy Action Plan or an Individual Healthcare Plan? YES ☐ NO ☐	
Is the child prescribed adrenaline auto-injectors (AAIs)? YES ☐ NO ☐	

Summary of current medical evidence seen as part of the risk assessment (copies attached)
Key Questions - Please consider the activities below and insert any considerations than need to be put in place to enable the child to take part.
Activities
Crayons/painting:
Creative activities: i.e. craft paste/glue, pasta
Science type activity: i.e. bird feeders, planting seeds, food
Musical instrument sharing (cross contamination issue):
Cooking (food prep area and ingredients):
Meal time: kitchen prepared food (is allergy information available): packed lunches:
Snacks (is allergy information available):
Drinks:
Celebrations: e.g. Birthday, Easter:
Hand washing:
Indoor play/PE:
Outdoor play/PE:
School field:
Forest school:
Offsite trips (are staff who accompany trip trained to use AAI?):
Allergy Management
Does the child know when they are having an allergic reaction?
What signs are there that the child is having an allergic reaction?
What action needs to be taken if the child has an allergic reaction?

If the medication is stored in one secure place are there any occasions when this will not be within 5 minutes reach if required? Yes ☐ No ☐ If Yes state when and how this can be adjusted:		
If the child is trained and confident can the medication be carried by them throughout the day? Yes ☐ No ☐ If No state reason:		
Does the child have two of their own prescribed AAls?		
Outcome of Risk Assessment		
New Allergy Action Plan/Individual Healthcare Plan required?	YES ☐	NO ☐
Existing Allergy Action Plan/Individual Healthcare Plan to be updated?	YES ☐	NO ☐

*Adapted from Wiltshire Children Anaphylaxis Risk Assessment
V8 January 2023*



MANOR ROAD PRIMARY SCHOOL

Anaphylaxis Risk Assessment for School Trip



This form should be completed by the class teacher / trip leader in liaison with the parents/carers and the child, if appropriate. It should be shared with all adults on the school trip.

Child/Young Person Name:	Date of Birth:										
Phase: Primary – Year	Teacher/TA:										
Details of Trip:											
Name and role people involved in this Risk Assessment (i.e. Class Teacher, Specialist Nurse or School Nurse):											
Date of Assessment:	Date of Trip:										
What is this child/young person allergic to?											
<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Allergen exposure risks to be considered (delete as required)</td> <td style="border: none;">Ingestion</td> <td style="border: none;">YES</td> <td style="border: none;">NO</td> <td style="border: none;">Direct contact</td> <td style="border: none;">YES</td> <td style="border: none;">NO</td> <td style="border: none;">Indirect contact</td> <td style="border: none;">YES</td> <td style="border: none;">NO</td> </tr> </table>		Allergen exposure risks to be considered (delete as required)	Ingestion	YES	NO	Direct contact	YES	NO	Indirect contact	YES	NO
Allergen exposure risks to be considered (delete as required)	Ingestion	YES	NO	Direct contact	YES	NO	Indirect contact	YES	NO		
Does this child already have an Individual Healthcare Plan or an Allergy Action Plan?											
YES NO											
Is the child prescribed adrenaline auto-injectors (AAIs)?											
YES NO											
Summary of current medical evidence seen as part of the risk assessment (eg. IHP, AAP, Letter from Hospital):											
Key Questions - Please consider the activities and location of the planned trip and insert any considerations than need to be put in place to enable the child to take part.											
Location											
Activities											

Food	
Meal time:	Packed Lunch to be provided by school following all standard allergy and cross-contamination safety procedures ☐
	Packed Lunch to be provided from home by parent ☐
The school 'no sharing food' rule to be followed at all times.	
Snacks:	To be provided from home by parent
Drinks:	To be provided from home by parent
Any other food specific to the trip:	
Allergy Management	
Standard handwashing procedures practiced.	
Does the child know when they are having an allergic reaction? YES NO	
What signs are there that the child is having an allergic reaction? See Individual Care Plan for details	
What action needs to be taken if the child has an allergic reaction? See Individual Care Plan and Allergy Action Plan for details	
Name of adult carrying the required medication (this must be either a 1:1 TA or the lead of the child's group and the adult must stay in close contact with the child at all times):	
Does the child have two of their own prescribed AAls?	
Outcome of Risk Assessment	