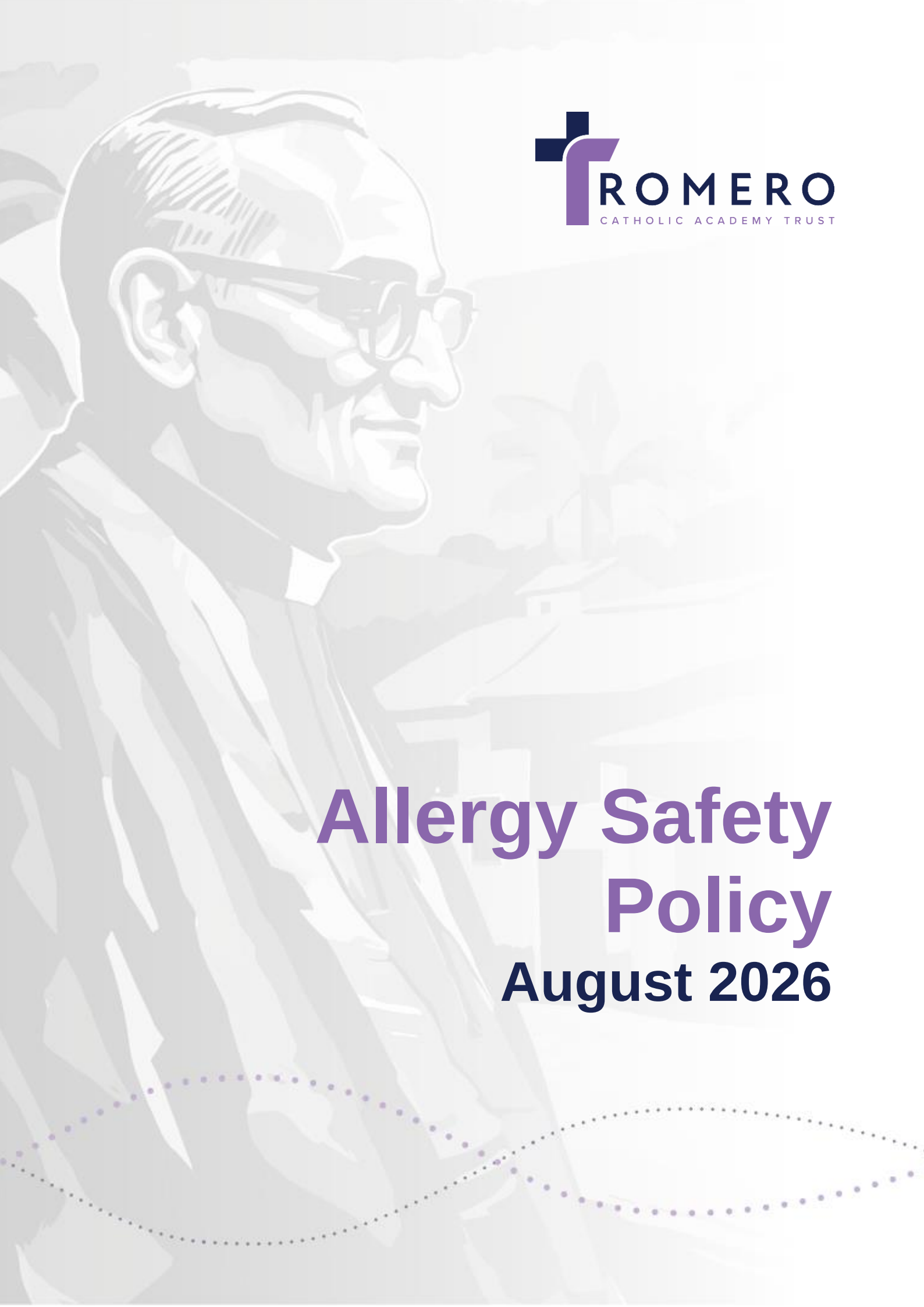

ROMERO
CATHOLIC ACADEMY TRUST

# Allergy Safety Policy

## August 2026

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# ROMERO ALLERGY SAFETY POLICY

## 1. POLICY STATEMENT

Romero Catholic Academy Trust is committed to ensuring that all pupils, staff and visitors with allergies are safe, supported and fully included in all aspects of school life. Romero CAT recognises that allergies, including the risk of anaphylaxis, can be life-threatening medical conditions and must be managed effectively through a proactive, whole-school approach.

Romero is committed to creating an environment in which:

- Allergies are understood and taken seriously;
- Risks are identified early and managed effectively;
- Pupils with allergies are able to participate fully and confidently in school life;
- Staff are knowledgeable, prepared and confident in both prevention and emergency response.

Each school within Romero CAT must have regard to this policy and implement it through a School Specific Allergy Safety Section (see Appendix 1), ensuring that arrangements are tailored to the needs of their individual setting while maintaining consistent Trust-wide standards.

A robust Allergy Safety Policy ensures that all members of the school community:

- Are clear on procedures and expectations;
- Understand their individual and collective responsibilities for reducing the risk of allergic reactions;
- Know how to recognise and respond promptly and appropriately to allergic reactions, including anaphylaxis;
- Contribute to a safe, inclusive and supportive environment for those with allergies.

Responsibility for implementing and maintaining an effective Allergy Safety Policy lies with each individual school, supported by the Central Team oversight and guidance.

This Allergy Safety Policy will be:

- Published on the school website and made available on request;
- Publicly available, easily accessible and communicated to staff, pupils, parents and carers;
- Clearly communicated to pupils, staff, parents and carers;
- Reviewed regularly to ensure it reflects current guidance, legislation and best practice.

Through this approach, Romero CAT aims to ensure that allergy management is not only compliant with statutory expectations, but also reflects best practice in safeguarding, inclusion and pupil wellbeing.

This policy has been developed with regard to the Allergy Safety in Schools Statutory Guidance (DfE, July 2026) issued under section 100 of the Children and Families Act 2014 as amended by the Children's Wellbeing and Schools Act 2026

## 2. SCOPE

This policy applies to all pupils, employees, agency workers, volunteers, governors, contractors, visitors and any other persons who may be affected by allergy risks arising from school activities or premises and includes all:

- Curriculum lessons
- Breaktimes and lunchtimes

- Breakfast clubs and after-school provision
- Educational visits and residentials
- Off-site activities.

## 3. DEFINITIONS

**Allergy:** A medical condition where exposure to a substance triggers a harmful immune response. Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency. People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication. 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

**Anaphylaxis:** A severe, potentially fatal allergic reaction affecting Airway, Breathing and/or Circulation.

**Allergy Action Plan (AAP):** A clinician-issued plan detailing emergency treatment which should be attached to the individual health care plan. Allergy Action Plans are medical documents designed to facilitate emergency response to reactions including anaphylaxis, by people without any special medical training or equipment other than access to an adrenaline device (e.g. adrenaline autoinjector “pen”). The relevant healthcare professional is responsible for determining the content of each child or young person’s Allergy Action Plan.

**Adrenaline auto-injector:** Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Clinical advice recommends that people at risk of anaphylaxis carry two devices with them at all times, regardless of the type of device, since two doses of adrenaline may be required.

**Individual Healthcare Plan (IHP):** A school-owned plan setting out support arrangements for an individual pupil. Children and young people should have an Individual Healthcare Plan (IHP) if:

- they have an allergy which has a functional impact on them in their school, college or setting;
- they are at risk of harm as a result of their allergy and
- they require arrangements and/or active management whilst in the setting which are additional to or different from those made generally.

The IHP will set out the additional and/or different arrangements that will be in place in the school, for supporting the child or young person with their medical condition or allergy, including in emergency situations.

As a practical rule, if a pupil's allergy requires staff to take specific actions, administer medication, make dietary adjustments, or respond to an emergency, they should have a documented Allergy Action Plan (produced by a medical professional) and an IHP.

## 4. RESPONSIBILITIES

### TRUST BOARD

- Approves this policy and ensures compliance across Romero Catholic Academy Trust schools.
- Receives assurance reports on allergy safety and serious incidents.

### ROMERO MEDICAL CONDITIONS & ALLERGY LEAD (CHIEF OPERATING OFFICER)

- Provides oversight, consistency and guidance to schools.
- Monitors incidents and near-misses across Romero CAT.
- Ensures regular review and learning dissemination.

### LOCAL GOVERNING BODIES

- Ensure local implementation of this policy.
- Maintain allergy safety on the school risk register.
- Appoint:
    - A named Governor for Allergy Safety
    - A named member of SLT for Allergy Safety, 'Designated Allergy Lead' and a deputy allergy lead.

### 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 policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances;
- Ensuring there is a designated allergy lead (and deputy) within the school;
- Ensuring that regular staff training and awareness is provided.

### DESIGNATED ALLERGY LEAD / DEPUTY ALLERGY LEAD

Each school must have a Designated Allergy Lead identified who will report into the headteacher. The school will ensure clear leadership for allergy management at all times by:

- Appointing a Designated Allergy Lead with overall responsibility;
- Appointing at least one Deputy Allergy Lead to provide cover in the absence of the lead;
- Ensuring that all staff understand who to contact for advice and support regarding allergy management;
- Maintaining continuity of safe practice during staff absence, changes or emergency situations.

The Allergy Lead is responsible for: -

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;

- Championing and practising allergy awareness across the school;
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff [although they have ultimate responsibility, the collation of information may be delegated to another member of staff;
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy Safety Policy, and other related procedures;
- Reviewing the school's stock of spare adrenaline pens and ensuring staff know where they are;
- Keeping a record of any allergic reactions or near-misses, reporting these to the appropriate authority where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy Safety Policy;
- Carrying out a round the table scenario based discussion on an annual basis;
- At regular intervals the Designated Allergy Lead will check procedures and report to SLT.

## ON ADMISSION TO THE SCHOOL

The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity;
- There is a clear structure in place to communicate this information to the relevant parties (i.e. pastoral lead, catering team);
- Parents are informed of catering arrangements prior to starting at the school;
- Plans are made for emergency medication.

## PARENTAL COMMUNICATION PROTOCOLS

The school will implement clear and structured communication arrangements with parents and carers of pupils with allergies. This will include:

- Pre-admission discussions to identify medical needs and agree control measures prior to the pupil starting;
- Confirmation that an Individual Healthcare Plan (IHP) and supporting medical documentation are in place before attendance begins;
- Ongoing communication where there are changes to a pupil's medical condition or treatment;
- Prompt communication following any allergic reaction or near miss, including details of actions taken and review outcomes.

## ALL SCHOOL STAFF

All school staff, including teaching staff, support staff, those running breakfast and afterschool clubs are responsible for:

- Championing and practising allergy awareness across the school;
- Reading, understanding and putting into practice the Allergy Safety Policy and related procedures, and asking for support if needed;

- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to;
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication or carrying it on their behalf [depending on the age of the pupils and the management of adrenaline pens in the school];
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training. Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager;
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to relevant staff and
- Ensuring that pupils have their medication and their Allergy Action Plan and Individual Health Care Plan.

## 5. INFORMATION AND DOCUMENTATION

### ACCESS TO ALLERGY INFORMATION

The school will ensure that allergy information for pupils is recorded on Arbor in the student profile using 'medical conditions'. An allergy register can be produced from Arbor by using custom reporting to provide accurate and up to date information on pupils with allergies.

The register will be:

- Updated on a regular basis and accessible in real time to all relevant staff, including teaching, support, catering, and temporary staff;
- Available during all school activities, including lessons, breaks, extracurricular provision.
- Supported by clear systems (e.g. staff briefings, secure digital systems or classroom-based information) to ensure that all staff know how to access allergy information instantly when needed.

In addition, it is required that;

- Pupils' Individual Healthcare Plans are 'pinned' on Arbor so that staff can access this information;
- Staff collate allergy information prior to off-site visits and this will be factored into risk assessments;

All schools must:

- Maintain a register of pupils (and staff, where relevant) with known allergies. This information can be collated using the custom reporting function on Arbor. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.
- Ensure every pupil needing active allergy management has:
    - An Individual Healthcare Plan (see appendix 4)
    - An attached Allergy Action Plan (and Asthma Action Plan if applicable)
- Schools must collect allergy information:
    - On admission
    - Following diagnosis

- When medical needs change
- On a regular basis

Each pupil with an allergy, that requires active allergy management, must have an Individual Healthcare Plan, the information must include:

- Known allergens, risk factors and routes of exposure
- Emergency contacts
- Details of the prescribed medication, including dose, this should include adrenaline pens, antihistamines etc
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis
- A photograph of each pupil
- And a copy of their Allergy Action plan (this should be written by a medical practitioner)

## STAFF AND VISITOR ALLERGIES

The school recognises that allergies can affect staff, volunteers, contractors, governors, visitors and other adults on site, as well as pupils. The school is committed to taking reasonable steps to support individuals with known allergies and to ensuring that appropriate arrangements are in place to manage foreseeable risks.

The school will:

- Encourage staff with significant allergies, particularly those at risk of anaphylaxis, to inform their line manager or another appropriate member of management of their condition;
- Maintain appropriate records of relevant allergy information for staff where consent has been provided and where this is necessary to support health, safety and emergency arrangements;
- Ensure that staff with severe allergies are able to access their prescribed medication promptly and without unnecessary barriers;
- Consider the needs of staff with allergies when undertaking risk assessments, planning activities and managing working environments;
- Provide staff with information, training and support relevant to their role and individual circumstances where appropriate.
- Where visitors, volunteers, contractors or other adults regularly attend the school and have a known severe allergy, the school will seek to make reasonable adjustments and ensure that relevant information is communicated to appropriate personnel where necessary to support their safety;
- For events, educational visits, lettings, community activities and other occasions involving visitors to the school site, organisers should consider whether allergy-related risks require specific arrangements or emergency planning measures.

The school will ensure that emergency procedures for allergic reactions are applicable to all persons on site. Staff should be aware that severe allergic reactions can occur in adults as well as children and must respond in accordance with emergency procedures, including the prompt administration of adrenaline where appropriate, calling 999 and providing emergency assistance until healthcare professionals arrive.

Information relating to staff and visitor allergies will be managed sensitively and in accordance with data protection requirements, while ensuring that relevant information is available to those who need it to maintain health, safety and wellbeing.

# 6. WHOLE SCHOOL ALLERGY AWARENESS TRAINING

All schools must ensure that whole-school allergy awareness training is:

- Provided at least annually for all staff;
- Delivered by a competent and appropriately qualified provider;
- Updated regularly to reflect current guidance, legislation and best practice.

Training will cover, as a minimum:

- The types of allergies and common allergens encountered within school settings;
- The signs and symptoms of allergic reactions, including mild, moderate and severe reactions;
- The recognition of anaphylaxis as a life-threatening medical emergency;
- Emergency response procedures, including escalation, calling 999 and following Allergy Action Plans;
- The safe and effective use of adrenaline auto-injectors (AAIs);
- The importance of preventative measures, including reducing exposure to allergens and managing risk;
- The reporting and recording of incidents and near misses, including the importance of learning from these events.

The school will ensure that staff are given opportunities to ask questions, practise skills and build confidence, particularly in relation to emergency response.

## TARGETED TRAINING

Targeted training will be provided for staff who have specific responsibility for pupils with allergies, particularly those supporting pupils with Individual Healthcare Plans (IHPs).

This training will:

- Be tailored to the needs of individual pupils, including their specific allergens, triggers and prescribed medication;
- Include hands-on practice in the administration of adrenaline auto-injectors, where appropriate;
- Ensure staff understand the content and requirements of each pupil's IHP and Allergy Action Plan;
- Be updated whenever there are changes to a pupil's medical needs or treatment.

## STAFF GROUPS AND INCLUSION IN TRAINING

The school will ensure that training is inclusive of all staff who may have responsibility for pupils at any point during the school day. This includes:

- Teaching staff
- Support staff
- Lunchtime supervisors
- Catering staff
- Breakfast and after-school club staff
- Administrative staff, where relevant
- Supply and agency staff, who will receive appropriate induction and key information prior to working with pupils

The school recognises that all staff may be required to respond in an emergency and will ensure that no member of staff is excluded from essential allergy awareness training.

### INDUCTION AND ONGOING COMPETENCE

The school will ensure that:

- All new staff receive allergy awareness information as part of their induction, including how to access allergy information and respond in an emergency;
- Temporary and agency staff are provided with relevant pupil information and emergency procedures before beginning work;
- Staff competence is maintained through refresher training, updates and practical scenarios;
- Records of all training are maintained, monitored and reviewed to ensure compliance.

### MONITORING AND ASSURANCE

The school will:

- Maintain a training record for all staff, including dates and content of training;
- Monitor training compliance to ensure that all staff remain up to date;
- Identify and address any gaps in knowledge or confidence through additional training and support;
- Review training effectiveness following incidents or near misses, ensuring continuous improvement.

### REGULAR SUPPLY, PERIPATETIC STAFF AND CONTRACTED STAFF WHO WORK WITH CHILDREN

All contracted and agency staff who work directly with children in schools must have allergy training. Schools should obtain a letter of assurance from the provider to demonstrate that staff have received allergy and AAI training. Information should be provided for this type of staff to ensure that they are aware of the location on AAIs on site, emergency procedures and who is the designated allergy lead etc.

## 7. MINIMISING RISK OF ALLERGEN EXPOSURE

Romero CAT adopts an “allergy-aware” model rather than blanket food bans. All schools will:

- Carry out risk assessments for:
  - Curriculum activities (DT, science, art, food tech)
  - School trips and residentials
  - Visitors and special events
- Implement policies to avoid food sharing and trading.
- Ensure:
  - Clear food labelling
  - Supervision at mealtimes
  - Inclusive alternatives rather than exclusion.

### STAFF COMPETENCE AND EMERGENCY RESPONSE

The school will ensure that **all staff**, regardless of role, are:

- Able to recognise the signs and symptoms of an allergic reaction, including anaphylaxis;

- Confident to take immediate action, including calling emergency services;
- Trained and competent to administer adrenaline auto-injectors (AAIs) where required.

This will be supported through:

- Whole-school training delivered at least annually;
- Induction arrangements for new and temporary staff;
- Opportunities to practise emergency scenarios to maintain confidence and readiness.

### AIR QUALITY AND ASTHMA TRIGGERS

The school recognises that air quality and environmental triggers can have a significant impact on pupils and staff with allergies, asthma and other respiratory conditions. The school also recognises that poorly controlled asthma is a known risk factor for severe allergic reactions and anaphylaxis.

The school will take reasonable steps to minimise exposure to airborne allergens and respiratory triggers wherever practicable.

Where a pupil has both asthma and an allergy, the school will recognise that this combination may increase the risk associated with an allergic reaction. Individual Healthcare Plans should therefore identify both conditions and include appropriate control measures, emergency arrangements and access to medication.

Staff will be made aware of any significant environmental triggers identified within a pupil's Individual Healthcare Plan and, where reasonably practicable, activities and learning environments will be adapted to reduce unnecessary exposure whilst maintaining full participation in school life.

The school will promote an allergy-aware and asthma-aware environment, recognising that effective management of air quality and respiratory triggers contributes to the safety, wellbeing and inclusion of all members of the school community.

## 8. FOOD PROVISION

All schools must comply with the relevant legislation and guidance around food provision in schools. Schools should work with caters to:

    - Identify allergens clearly
    - Prevent cross-contamination
    - Provide safe alternatives
- Ensure pupils with allergies:
    - Are not segregated at mealtimes
    - Can safely access free school meals

### CATERING AND ALLERGEN MANAGEMENT CONTROLS

The school will ensure that food provision is managed safely and in accordance with statutory requirements and national guidance on allergen management.

### ALLERGEN IDENTIFICATION AND MENU SYSTEMS

The school will ensure that:

- An up-to-date allergen matrix (menu allergen chart) is maintained for all food provided on site, clearly identifying the presence of the 14 recognised allergens in each menu item;
- All menus, recipes and ingredient information are reviewed and updated regularly, particularly where ingredients, suppliers or products change;

- Catering staff check product labels and ingredient information for all food used, including substitutions, to ensure allergen information remains accurate;
- Allergen information is clearly communicated and accessible to staff, pupils and parents to support safe food choices;
- Any food classified as pre-packed for direct sale (PPDS) is labelled in full compliance with allergen labelling requirements, including a full ingredients list with allergens clearly emphasised.

### PREVENTION OF CROSS-CONTAMINATION

The school will implement robust procedures to minimise the risk of cross-contamination, including:

- Clear food preparation controls, ensuring separation of allergen-containing ingredients and allergen-free meals;
- Use of separate utensils, equipment and preparation areas where required;
- Strict cleaning and hygiene procedures to prevent the transfer of allergens between foods;
- Careful management of food storage, handling and serving practices to maintain the integrity of allergen-free meals;
- Ensuring that catering staff are appropriately trained in allergen management and food safety procedures.

The school recognises that effective allergen management relies on consistent practice and will ensure that all catering staff understand and follow these procedures at all times.

### IDENTIFICATION AND SAFE PROVISION FOR PUPILS WITH ALLERGIES

The school will ensure that:

- Pupils with known food allergies are clearly identified to catering staff, in line with data protection requirements;
- Safe and suitable meal options are planned and provided in accordance with each pupil's Individual Healthcare Plan (IHP);
- Appropriate supervision arrangements are in place during mealtimes to reduce the risk of allergen exposure;
- Systems are in place to ensure that correct meals are provided to the correct pupil, particularly where specific dietary requirements apply.

### COMMUNICATION AND COORDINATION

The school will ensure effective communication between:

- Catering staff, school leaders and pastoral teams;
- Parents and carers, particularly in relation to menu planning, changes or concerns;
- External catering providers, where applicable, to ensure consistent standards are maintained.

Catering arrangements will be regularly reviewed to ensure they remain safe, effective and responsive to the needs of pupils with allergies. The school will ensure that all suppliers provide accurate and up-to-date allergen information.

## 9. EMERGENCY RESPONSE AND ADRENALINE DEVICES

The school will ensure that all staff are prepared to respond effectively and without delay to allergic reactions, including anaphylaxis.

All schools must:

- Treat suspected anaphylaxis immediately with adrenaline, recognising that this is a life-threatening medical emergency;
- Ensure that no delay occurs in administering treatment, even if there is uncertainty. Where in doubt, adrenaline should be given in line with medical guidance;
- Call 999 immediately after administering adrenaline and clearly state “anaphylaxis”, following emergency operator instructions;
- Ensure that a second dose of adrenaline can be administered if required, in accordance with medical advice and the pupil’s Allergy Action Plan;
- Ensure that pupils are not left unattended during a reaction, and that appropriate supervision is maintained until emergency services arrive;
- Make arrangements for staff to meet and direct emergency services to the location quickly;
- Ensure that a pupil’s Allergy Action Plan is followed at all times, including during off-site activities;
- Ensure that adrenaline auto-injectors (AAIs) are accessible within 5 minutes at all times, including:
    - During lessons
    - At breaktimes and lunchtimes
    - During extracurricular activities
    - On educational visits and off-site provision (e.g. pupils to take their adrenaline device with them)
- Ensure any person receiving adrenaline from an auto injector is taken to hospital with their individual health care plan, allergy action plan and used adrenaline auto injector.

## “SPARE” ADRENALINE DEVICES (AAI’S)

In line with statutory guidance, the school will:

- Hold an appropriate number of “spare” adrenaline auto-injectors (AAIs), suitable for the age and needs of the pupils;
- A spare school AAI device will only be used if:
    - The pupil does not have a prescribed AAI
    - The pupil’s prescribed AAI are not available or misfire
- Ensure spare AAIs are:
    - Stored in an unlocked location that is known to all staff;
    - Kept at room temperature and in line with manufacturer guidance;
    - Clearly labelled, with instructions available for use;
- Ensure that spare AAIs are not used as a substitute for a pupil’s prescribed medication, but are available in an emergency where needed;
- Maintain a clear and accurate log of:
    - The location of all AAIs;
    - Expiry dates;
    - Any use of devices;
    - Replacement arrangements;
- AAIs will be visually checked on a monthly basis and the checks will be recorded on iAM Compliant;
- Check expiry dates regularly and ensure that all devices are replaced in good time;
- Ensure that relevant staff are aware of the location and correct use of spare AAIs, and that these are included in training and emergency procedures;
- Ensure that AAIs are available and taken on off-site visits, in line with risk assessments.

| School type | AAIs for children under age 6 years (150 micrograms) e.g. EpiPen Junior, Jext 150 | AAIs for individuals over 6 years of age (300 micrograms) e.g. EpiPen, Jext 300 |
|---|---|---|
| State-funded nursery school | One pair of "spare" AAIs | n/a |
| Primary school | One pair of "spare" AAIs | One pair of "spare" AAIs |
| Secondary school | n/a | One or two pairs of "spare" AAIs * |
| Special school | One pair of "spare" AAIs | One pair of "spare" AAIs |

* Secondary schools with large sites should consider having two pairs of "spare" AAIs, so that a pair of "spare" AAIs are available within five minutes of wherever they may be needed.

### 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.

The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, 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.

## 10. WELLBEING AND INCLUSION

The school is committed to ensuring that pupils with allergies are safe, included, and supported to fully participate in all aspects of school life.

The school will:

- Actively prevent allergy-related bullying, recognising that this can be a safeguarding issue. Any incidents of bullying, teasing or discriminatory behaviour relating to allergies will be taken seriously and addressed in line with the school's behaviour and anti-bullying policies;
- Foster a culture of awareness, respect and inclusion, where pupils understand allergies, the potential risks involved, and the importance of supporting their peers;
- Support pupils who may experience anxiety related to their allergies, recognising the potential emotional impact of living with a life-threatening condition. This may include pastoral support, reassurance, and reasonable adjustments to help pupils feel safe and confident in school;
- Ensure that pupils with allergies are not unfairly excluded from activities, including curriculum lessons, trips, clubs or social events. Where necessary, reasonable adjustments and risk assessments will be implemented to enable safe participation;
- Communicate clearly and sensitively with families, ensuring that parents and carers feel informed, reassured and involved in the management of their child's allergy;
- Involve pupils, where appropriate and in line with their age and understanding, in planning and managing their own allergy needs**,** supporting them to develop confidence, independence and self-management skills;
- Promote age-appropriate education and awareness of allergies across the school community, helping to reduce stigma and improve understanding among pupils and staff;

- Take account of the individual needs and preferences of each pupil**,** ensuring that support arrangements are personalised and regularly reviewed.

## UNACCEPTABLE PRACTICE

The school recognises that effective allergy management relies on ensuring that appropriate support is provided at all times. The following practices are considered unacceptable and must not occur:

- Preventing or delaying access to prescribed medication, including adrenaline auto-injectors (AAIs), inhalers or other emergency medication;
- Failing to follow a pupil's Individual Healthcare Plan (IHP), Allergy Action Plan or medical advice provided by healthcare professionals;
- Ignoring, dismissing or failing to appropriately consider concerns raised by pupils, parents, carers or healthcare professionals;
- Assuming that all pupils with allergies require the same level or type of support;
- Assuming that older pupils do not require support simply because they are able to take greater responsibility for managing their own condition;
- Excluding pupils from activities, educational visits, clubs, events or curriculum activities solely because they have an allergy, unless a risk assessment demonstrates that participation cannot be made safe through reasonable adjustments;
- Requiring a parent or carer to attend school activities, trips or events as a condition of the pupil being allowed to participate;
- Allowing bullying, teasing, harassment or discriminatory behaviour relating to allergies or medical conditions to go unchallenged;
- Failing to share relevant allergy information with staff on a need-to-know basis where this may affect the safety of a pupil;
- Delaying the administration of adrenaline in cases of suspected anaphylaxis due to uncertainty or waiting for parental consent at the point of emergency;
- Leaving a pupil experiencing an allergic reaction or suspected anaphylaxis unattended;
- Discouraging appropriate self-management or self-carry of medication where this has been agreed as part of the pupil's Individual Healthcare Plan and is considered suitable for their age, understanding and circumstances;
- Implementing blanket approaches that create a false sense of safety, such as relying solely on food bans, rather than maintaining an effective allergy-aware culture and robust risk management arrangements.

Any concerns regarding unacceptable practice must be reported immediately to the Designated Allergy Lead and, where appropriate, through the school's safeguarding, health and safety, or incident reporting procedures. Concerns will be investigated promptly and appropriate action taken to protect the safety, wellbeing and inclusion of pupils with allergies.

## SELF-MANAGEMENT AND SELF-CARRY OF MEDICATION

The school recognises the importance of supporting pupils to develop confidence, independence and age-appropriate responsibility in managing their allergy. Wherever possible, pupils will be encouraged and supported to understand their allergy, recognise symptoms of an allergic reaction and participate in decisions about their care and support.

The school will:

- Support pupils to develop the knowledge and skills necessary to manage their allergy safely and effectively in accordance with their age, understanding and individual circumstances;
- Encourage pupils to take an active role in the development and review of their Individual Healthcare Plan (IHP), where appropriate;
- Promote safe self-management whilst ensuring that appropriate supervision and support remain available at all times;
- Work collaboratively with parents, carers and healthcare professionals to determine the level of independence appropriate for each pupil.

Where agreed through the Individual Healthcare Plan, pupils may be permitted to carry their own prescribed medication, including adrenaline auto-injectors (AAIs), inhalers and antihistamines. Decisions regarding self-carry will be made on an individual basis and will take account of:

- The pupil's age, maturity and understanding of their condition;
- Their ability to recognise symptoms and seek help appropriately;
- Medical advice and recommendations from healthcare professionals;
- The views of parents or carers;
- Any safeguarding or operational considerations relevant to the school setting.

Where self-carry is not appropriate, the school will ensure that medication remains readily accessible and can be obtained without delay in an emergency. The school recognises that increasing independence does not remove the responsibility of staff to provide support. Pupils who self-manage or self-carry medication will continue to receive appropriate supervision, support and protection in accordance with their Individual Healthcare Plan.

No pupil will be prevented from carrying or accessing their prescribed medication where this has been agreed as part of their Individual Healthcare Plan. Likewise, pupils will not be expected to assume responsibility beyond that which is appropriate for their age, understanding and individual circumstances.

Arrangements for self-management and self-carry will be reviewed regularly and following any significant change in the pupil's medical needs, treatment, or ability to manage their condition safely.

## 11. INCIDENTS, NEAR MISSES AND LEARNING

The school recognises the importance of responding effectively to incidents and using them as opportunities to improve practice and prevent recurrence.

The school will:

- Record all allergic reactions and near miss incidents, regardless of severity, using the school's agreed reporting systems. Records will include details of the incident, actions taken, and outcomes, this will be reported on CPOMs;
- Treat all incidents, including near misses, as significant safeguarding information, recognising their importance in identifying risks and preventing future harm;
- Inform parents and carers promptly following any allergic reaction or near miss, providing clear information about what occurred, actions taken, and any immediate next steps;
- Ensure that incidents are reported in line with Romero procedures, including:
    - Notification to the Governing Body through appropriate reporting mechanisms;

    - Escalation to Romero CAT leadership where required, particularly in the case of serious incidents or trends;
- Undertake a structured review following each incident or near miss, including:
    - Reviewing and, where necessary, updating the pupil's Individual Healthcare Plan (IHP);
    - Reviewing relevant risk assessments, including curriculum activities, food provision, or supervision arrangements;
    - Identifying any gaps in staff training, awareness or procedure;
- Ensure that learning from incidents is clearly identified, documented and acted upon, with improvements implemented in a timely manner;
- Share learning across Romero CAT, where appropriate, to strengthen practice, raise awareness and prevent similar incidents in other settings;
- Where appropriate, involve relevant staff, parents and (where suitable) the pupil in post-incident reviews, ensuring that actions are informed by a full understanding of the circumstances;
- Monitor patterns or trends in incidents and near misses to support proactive risk management and continuous improvement.

## 12. REVIEW AND GOVERNANCE

These arrangements will be reviewed at least annually, or sooner following:

- A serious incident
- Changes in guidance or legislation

The Governing Body will receive assurance reports on allergy management and compliance; the school will:

- Take all reasonable steps to ensure alignment with emerging national best practice and will regularly review access to allergy information and staff awareness;
- Monitor compliance through internal checks and leadership oversight;
- Take prompt action where gaps or weaknesses are identified;
- The school will ensure that compliance with allergen management procedures is subject to periodic checks and verification by completing regular audits of allergy systems and reporting back to Governors.

## PUBLICATION AND ACCESSIBILITY

The school will ensure that this Allergy Safety Policy is:

- Published on the school website in accordance with statutory requirements and Romero expectations;
- Easily accessible to pupils, parents, carers, staff, governors and other interested parties;
- Available on request in alternative formats where reasonably required;
- Brought to the attention of staff as part of induction and ongoing training arrangements;
- Communicated to parents and carers through appropriate channels, particularly where updates or significant changes are made;
- Supported by locally maintained procedures and information relevant to the individual school setting.

The school will also ensure that key allergy safety information, including arrangements for emergency response, staff responsibilities and access to medication, is effectively communicated to those who need it in order to support the safety, wellbeing and inclusion of pupils with allergies.

Following each review, the most current version of the policy will be approved through the school's governance arrangements and published promptly on the school website.

# APPENDIX 1 – SCHOOL SPECIFIC ALLERGY SAFETY SECTION

## 1. SCHOOL DETAILS

| | **Details** |
|---|---|
| School Name | St Michael & St John's RC Primary School |
| Address | Lowergate, Clitheroe BB7 1AG |
| Phase | Primary |
| Headteacher / Principal | Mrs Zoe Mabbott |
| Date of Last Policy Review | September 2026 |

## 2. NAMED RESPONSIBLE PERSONS

| **Role** | **Name** |
|---|---|
| SLT Member for Designated Allergy Safety | Zoe Mabbott |
| Deputy Allergy lead (in absence of the lead) | Marc Duckworth |
| Governor for Allergy Safety | Kevin Downes |
| Operational Lead (SENCo / DSL / Pastoral Lead) | Ann Russell |

## 3. PUPIL ALLERGY PROFILE

| **Item** | **Details** |
|---|---|
| Number of Pupils with Known Allergies | 4 |
| Number at Risk of Anaphylaxis | 0 |
| Common Allergens within this School | milk |
| Reviewed Date: | 8/9/26 |

## 4. STORAGE AND ACCESS TO SPARE MEDICATION

| **Location** | **Adrenaline Type** | **Quantity** | **Access Arrangements** |
|---|---|---|---|
| School Office | EpiPen Jr 0.15mg | 1 | Wall mounted First Aid Box |
| School Office | EpiPen 0.3mg | 1 | Wall mounted First Aid Box |
| | | | |
| | | | |
| | | | |

## 5. SCHOOL SPECIFIC RISK CONTROLS

| **Area** | **Arrangements / Controls** |
|---|---|
| Mealtime Identification Methods | Cook has a list of Allergies & dietary requirements |
| Classroom Activity Controls | Class Register Identification |
| Playground and PE Considerations | Class Lists |
| Air Quality / Fragrance Considerations | |

## 6. EDUCATIONAL VISITS AND OFF-SITE ACTIVITIES

| **Area** | **Arrangements** |
|---|---|
| Risk Assessment Process | *Allergies will be considered for each trip* |
| Medication Location and Responsibility | *This will be reviewed by the trip leader* |

| | |
|---|---|
| Emergency Communication Arrangements | *As per the base contact* |

## 7. TRAINING ARRANGEMENTS

| **Item** | **Details** |
|---|---|
| Date of Last Whole-School Allergy Training | Completed individually on iACompliant September 2026 |
| Staff Trained in Adrenaline Administration | Yes – Part of Inset day training 1/9/26 |
| Induction Arrangements for New Staff | Induction checklist completed with Marc Duckworth |

## 8. REVIEW AND MONITORING

| **Item** | **Details** |
|---|---|
| Date of Last Review | |
| Actions Taken | |

## APPENDIX 2 FOOD TECHNOLOGY LESSONS (SECONDARY PHASE)

The school recognises that Food Technology (DT/ Food) lessons present an increased risk of allergen exposure and will ensure that appropriate controls are in place to enable pupils with allergies to participate safely and inclusively.

The school will undertake the following:

### PLANNING AND RISK ASSESSMENT

- Ensure that all Food Technology lessons are subject to appropriate risk assessment, taking into account known pupil allergies and potential allergen exposure;
- Plan lessons in advance to identify allergens within recipes and ingredients, and consider whether safer alternatives can be used;
- Avoid the unnecessary use of high-risk allergens where suitable alternatives are available, particularly where pupils with severe allergies are present;
- Ensure that risk assessments are reviewed and adapted where pupil needs change.

### STAFF TRAINING AND COMPETENCE

The school will ensure that:

- All staff delivering Food Technology lessons receive training in food hygiene, allergen awareness, allergen risk reduction, food labelling and the prevention of cross-contamination;
- Staff understand how to read and interpret ingredient labels and allergen declarations before ingredients are used in lessons;
- Staff have access to Individual Healthcare Plans (IHPs) and Allergy Action Plans when planning practical activities.

### PARENT AND PUPIL ENGAGEMENT

The school will:

- Communicate with parents and carers of pupils with allergies before practical activities take place where allergen risks may exist;
- Discuss/ provide information on proposed recipes and ingredients with families to identify suitable adaptations and control measures;
- Inform pupils in advance of upcoming practical lessons and explain the controls being implemented to support their safe participation;
- Encourage pupils to develop age-appropriate allergy management skills whilst ensuring that appropriate staff support remains available.

### IDENTIFICATION AND COMMUNICATION

- Ensure that teachers and relevant support staff are aware of pupils with allergies, including the specific allergens and severity of risk;
- Make allergy information readily accessible during lessons, including the relevant Individual Healthcare Plans (IHPs) and Allergy Action Plans;

- Communicate clearly with pupils about ingredients being used and expected safety behaviours during lessons.

## EQUIPMENT AND CLASSROOM ENVIRONMENT

Where required, the school will provide:

- Dedicated utensils, equipment and preparation resources for pupils with allergies;
- An allergy safe workstation will be designated within the food technology rooms;
- The designated workstation will be thoroughly cleaned before practical activities commence;
- Separate cleaning materials where necessary to prevent allergen transfer;
- Clean aprons and protective clothing for pupils with allergies;
- Seating arrangements that increase distance between a pupil and their identified allergen where appropriate;
- Additional controls for shared ovens and cooking equipment, including consideration of oven placement and measures to minimise cross-contamination risks;
- Ensure that senior leadership support is available for staff managing complex allergy risks within Food Technology teaching environments

## PUPIL INCLUSION AND ADAPTATION

- Ensure that pupils with allergies are fully included in Food Technology lessons wherever possible;
- Provide adapted recipes or alternative ingredients to enable safe participation;
- Where necessary, implement additional controls or supervision rather than excluding the pupil from the activity;

## FOOD TASTING AND TAKING FOOD HOME

The school will ensure that:

- Any food provided for tasting, sharing or demonstration purposes is subject to an ingredient checks;
- Food sharing activities are supervised by staff at all times.

## EMERGENCY PREPAREDNESS

- Ensure that adrenaline auto-injectors (AAIs) and other prescribed medication are immediately accessible during lessons;
- Ensure that staff supervising lessons are trained and confident in recognising and responding to allergic reactions, including anaphylaxis;
- Follow the pupil's Allergy Action Plan in the event of an incident;

## STAFF RESPONSIBILITIES

- Ensure that all staff delivering Food Technology lessons:
    - Have received appropriate allergy awareness and AAI training;

- Understand their responsibilities in risk assessment and allergen control;
- Are vigilant at all times to signs of allergic reaction and unsafe practice.

## REVIEW AND MONITORING

- Ensure that Food Technology practices are periodically reviewed as part of wider allergy management monitoring;
- Use any incidents or near misses to inform improvements to lesson planning, supervision and control measures.

Any issues should be reported to the Designated Allergy Lead.

# APPENDIX 3 FOOD-BASED ACTIVITIES (PRIMARY PHASE)

The school recognises that food-based learning activities, including cooking, baking and food tasting, present potential risks for pupils with allergies. The school will ensure that appropriate controls are in place to enable pupils to participate safely, confidently and inclusively.

## PLANNING AND RISK ASSESSMENT

The school will:

- Ensure that all food-based activities are appropriately risk assessed in advance, taking account of known pupil allergies and medical needs;
- Plan activities to identify any allergens in ingredients and consider whether safer alternatives can be used;
- Avoid the use of high-risk allergens where reasonably practicable, particularly where pupils with severe allergies are present;
- Ensure that risk assessments are shared with relevant staff and reviewed regularly.

## IDENTIFICATION AND COMMUNICATION

The school will ensure that:

- Staff leading activities are aware of all pupils with allergies, including the nature and severity of the allergy;
- Allergy information is readily accessible during the activity, including Individual Healthcare Plans (IHPs) where required;
- Instructions are given to pupils in an age-appropriate way, including clear expectations about food handling (e.g. no sharing, no swapping of food).

## CONTROL MEASURES AND SAFE PRACTICE

The school will implement appropriate controls to reduce the risk of exposure to allergens, including:

- Close supervision of pupils at all times during food activities;
- Ensuring that ingredients are clearly labelled and checked before use;
- Preventing food sharing, swapping or tasting of unsafe foods;
- Ensuring effective handwashing before and after activities;
- Using clean equipment, utensils and surfaces, and implementing additional controls where necessary to reduce cross-contamination;
- Adjusting activities to ensure they are safe for all pupils participating.

## INCLUSION AND ADAPTATION

The school is committed to inclusive practice and will:

- Ensure that pupils with allergies are able to participate fully wherever possible;
- Provide adapted recipes or alternative ingredients to enable safe participation;
- Make reasonable adjustments to activities to avoid unnecessary exclusion, while maintaining safety as the priority;
- Work with parents and carers where needed to agree suitable arrangements.

## EMERGENCY PREPAREDNESS

The school will ensure that:

- Pupils have immediate access to their prescribed medication, including adrenaline auto-injectors where required;
- Staff supervising activities are trained and confident in recognising and responding to allergic reactions, including anaphylaxis;
- The pupil's Allergy Action Plan is followed in the event of an incident;
- Emergency procedures are clearly understood by all staff involved.

## STAFF RESPONSIBILITIES

Staff involved in food-based activities will:

- Follow the school's allergy safety policy and risk assessments;
- Remain vigilant at all times for unsafe practices or potential risks;
- Seek advice where needed and escalate concerns promptly.

## REVIEW AND MONITORING

The school will:

- Review food-based activities as part of wider allergy management monitoring;
- Use any incidents or near misses to improve planning, supervision and control measures.

Any issues should be reported to the Designated Allergy Lead.

ROMERO
CATHOLIC ACADEMY TRUST

# APPENDIX 4 INDIVIDUAL HEALTHCARE PLAN

| Pupil information | | |
|---|---|---|
| **Full name** | | *Insert photo* |
| **Date of Birth** | | |
| **Class/Year Group** | | |
| **School Name** | | |
| **NHS Number** | | |
| **Identified SEND need** | Yes ☐ No ☐ | |
| **EHCP/ K** | Yes ☐ No ☐ | |
| **Primary area of need** | | |

| Family & medical contact information | | | |
|---|---|---|---|
| **Priority Contact 1 Name** | | | |
| **Phone number** | | **Alternative No** | |
| **Relationship** | | | |
| **Priority Contact 2 Name** | | | |
| **Phone number** | | **Alternative No** | |
| **Relationship** | | | |
| **GP Contact** | | **Phone number** | |
| **Who is responsible for providing support to school? e.g. specialist nurse** | | | |

| Medical condition / Diagnosis | |
|---|---|
| **Description** | |
| **Date diagnosed** | |
| **Known triggers** | |

| Symptoms and risks | |
|---|---|
| **Typical symptoms** | |
| **Early warning signs** | |
| **Emergency symptoms** | |
| **Risks if symptoms worsen** | |
| **Actions following an emergency** | |

| Medication and Treatment administered at school | | | | | |
|---|---|---|---|---|---|
| **Medication** | Dosage | Method | Frequency | Storage | Side Effects |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Emergency procedures | |
|---|---|
| **What to do** | |
| **Call 999 if** | |

| Daily care requirements | |
|---|---|
| **Medication times** | |
| **Monitoring needs** | |
| **Dietary requirements** | |
| **Activity adjustments** | |
| **Other arrangements e.g. snacks** | |

| Support required | |
|---|---|
| **Supervision level** | |
| **Trained staff** | |
| **Additional support** | |

| Triggers/ Environmental considerations | |
|---|---|
| **Allergens** | |
| **Physical triggers** | |
| **Weather factors** | |
| **Stress triggers** | |
| **Other triggers** | |

| Educational impact | |
|---|---|
| **Attendance impact** | |
| **Any other impact e.g. learning** | |
| **Special arrangements** | |
| **Has pupil passport been devised?** | Yes ☐ No ☐ |

| School trips and activities | | |
|---|---|---|
| **Would specific plans be needed?** | Yes ☐ No ☐ | |
| **Medication needed?** | Daytrip: Yes ☐ No ☐ | Residential: Yes ☐ No ☐ |
| **Please specify** | | |
| **Would a specific risk assessment be needed?** | Yes ☐ No ☐ | |

| Staff training | |
|---|---|
| **Additional training required** | |
| **Date completed** | |

| | |
|---|---|
| **Delivered by** | |

| **Consent and permissions** | | | |
|---|---|---|---|
| **Can the pupil self-administer medication?** | Yes ☐ No ☐ NA ☐ | | |
| **Emergency Medication consent (where applicable)**<br>I consent to appropriately trained staff administering emergency medication, including prescribed emergency medication and any permitted emergency "spare" medication held by the school where required to preserve life or prevent serious deterioration.<br>**Prescribed medication (where applicable)**<br>I give permission for school staff to administer the prescribed medication detailed within this Healthcare Plan, in accordance with the prescriber's instructions and the school's Medicines Policy. | | | |
| **Parent/Carer name** | | | |
| **Signature** | | **Date:** | |
| *Needs to be physically signed by the parent / career and then scanned and pinned onto Arbor* | | | |

| **This plan has been agreed by:** *(pupil, parent, career/ doctor/ nurse etc)* | | | |
|---|---|---|---|
| **Name** | | | |
| **Role** | | | |
| **Signature** | | **Date** | |
| **Name** | | | |
| **Role** | | | |
| **Signature** | | **Date** | |
| **Name** | | | |
| **Role** | | | |
| **Signature** | | **Date** | |

| **Review Information** | |
|---|---|
| **Start date** | |
| **Review date** | |
| **Reviewed by** | |
| **Action plan attached** | Yes ☐ No ☐ |