Springvale Primary School

Policy Title: Allergy Safety Policy

Date of Review: Summer 2026

Review by: Summer 2029

Owned by: Headteacher & Chair of Governors

All policies available at www.springvaleprimary.org

Springvale Primary School

Allergy safety policy

This policy has been prepared in line with the DfE statutory guidance on 'Allergy Safety in Schools' published in July 2026. This policy has been adapted from the DfE Allergy Safety Policy template.

Section 34 of the Children's Wellbeing and Schools Act 2026 requires that LA maintained schools, academies and PRUs must have an allergy safety policy.

As required, our Headteacher, Mrs R Fearn is the responsible person for allergy safety at Springvale Primary School.

This policy will be reviewed at least annually or may be reviewed sooner should an allergy related incident or near miss occur.

Culture

Awareness training

All staff employed by school will be trained in allergy awareness and emergency response, at least annually.

Allergy awareness training undertaken will ensure 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;
    - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
    - training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);
- Understand the **impact** allergy can have on a child or young person's wellbeing;
- Understand the school, college or setting'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").

Training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

Wellbeing

Springvale School acknowledges that the risk posed by allergy (and the possibility of anaphylaxis) can be a significant cause of anxiety for both our pupils and their parents/ carers. To promote the wellbeing of pupils with allergies we will ensure that all activities in the classroom are safe and inclusive for allergy sufferers thus reducing the risk of the affected pupils being treated differently due to their allergy.

Minimising risk

To minimise the risk of individuals (whether children, young people, staff or visitors) coming into contact with their known allergens:

- We do not allow nuts of any kind to be brought in to school as set out in our separate 'Nut Free Policy'.
- We stipulate to parents that home baking should not be brought in to school to share with other pupils and staff.
- For individual allergies, we will implement reasonable measures in their environment to minimise the risk of contact with their allergen in line with their IHP.
- School have a record on SIMS of any children with medical condition. This report is shared with all staff at the beginning of the school year. School also produce an additional report of any pupils with severe medical conditions or allergies - this report includes photographs of each pupil. Class teachers are expected to have a printed copy of these reports available in their classroom. Copies are also displayed in the school office and/or Staff room.
- For staff planning any activity, they must consider the risk of exposure to allergens, for example in craft, science, musical or cooking activities, or where activities involve animals.
- Specific risk assessments must be completed to manage the risks of exposure to allergens for individuals with an allergy when planning external visits or trips.

Food allergy

We have a 'Nut Free Policy' at Springvale Primary, this policy sets out how we manage this particular allergen in school.

Our school meals are provided by ISS, a third-party provider contracted through PFI. ISS follow a strict nut free policy so that anyone with a nut allergy in particular does not require a separate special menu. For any pupils or staff with other allergies (e.g. dairy, gluten, soya) they will be provided with a special menu to cater for this to ensure their school meals do not contain any allergens. Special menus are arranged prior to a new school meals menu being implemented - this is typically in the Autumn 2 and Summer 1 terms of the school year.

Individual children and young people

Identification

When any new pupil joins our school, parents are asked to complete new started forms which includes a section for any medical conditions or allergies. From this information our Health and Safety lead will put together an 'Individual Healthcare Plan'. The IHP is then agreed and signed by the child's parent/ carer, their main class teacher and our headteacher. Parents are asked to provide any medication required and will also be asked to sign a medication consent form.

We also ask any new staff to complete an emergency contact and medical information form so that we are aware of any allergens and medication.

All IHPs are kept on pupil/ staff files and recorded on SIMS. Any medication is recorded on the Medical Tracker system. As outlined above, any new pupils with allergies will be added to our list of children with medical conditions which is shared with all staff at the beginning of academic year and updated as and when any changes occur. School also produce an additional report of any pupils with severe medical conditions or allergies - this report includes photographs of each pupil. Class teachers are expected to have a printed copy of these reports available in their classroom. Copies are also displayed in the school office and/or Staff room.

Individual Healthcare Plans

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
- they are at risk of harm as a result of their allergy
- they require arrangements which are additional to or different from those made generally.

IHPs set out the additional and/or different arrangements that have been put in place to support a pupil with their medical condition or allergy, including in emergency situations. IHPs aim to set out what specific support arrangements a pupil may require. This includes whether they require reasonable adjustments or medication

For any pupils who have an **Allergy Action Plan** and/or **Asthma Action Plan** issued by a healthcare professional, the IHP will refer to this and the action plan will be attached to their IHP. Whenever an updated Action Plan becomes available, the person's IHP will be reviewed to incorporate it.

IHPs are reviewed with parents/carers on an annual basis - typically this is in September at the beginning of a new school year.

Prescribed adrenaline

For any pupils or staff with a prescribed adrenaline device, we require 2 devices to be in school at all times, 1 of these devices is stored in the pupil's classroom or staff member's area of work. The 2nd device is stored on top of the first aid cupboard in the school office. Both devices must be taken on school trips with the staff or pupil and kept in the first aid bag by a member of staff

attending the trip. **In the case of anaphylaxis, adrenaline should be administered within five minutes**. This includes in the lunch area, playground and sports fields or when on visits or trips.

Medication for our pupils is recorded on Medical Tracker - we use this system to manage medical needs and to record first aid in school. We check this system regularly to ensure all medication is in date. For any medication going out of date, we will contact parents & carers at least a month in advance of expiry so that they may order/arrange for new medication to be provided to school.

We review all IHPs on an annual basis, typically in September, or may review before this if there have been any incidents in school or at home or they have been issued with a new Allergy Action Plan.

School-wide policies

“Spare” adrenaline devices & asthma inhalers

School will use and manage “spare” adrenaline devices& asthma inhalers in the following way:

- We keep 2 sets of “spare” adrenaline devices in school - 1x junior set (for children age 6 years and under) and 1x adult set (for children over 6 years) as well as 2x salbutamol inhalers.
- These “spare” medications are located in the school office on top of the first aid cupboard (signage displayed to indicate this).
- “Spare” adrenaline devices are intended for any pupils, staff or visitors who are having an anaphylactic reaction and their prescribed medication is lost, defective or damaged. The “spare” adrenaline devices may also be used in an emergency where the person does not have a prescribed adrenaline device but appears to be having an anaphylactic reaction. Similarly, “spare” salbutamol inhalers can be used for anyone experiencing an asthma attack if their prescribed inhaler is lost, defective or damaged or in an emergency if they are suffering from an asthma attack but do not have a prescribed inhaler.
- School medications are recorded on Medical Tracker and the expiry dates are checked on a half termly basis to ensure they are in date. We aim to order new medication at least 1 month in advance of the expiry date
- Any used or expired adrenaline injectors are disposed of in the sharps bin - located in the school office. Expired inhalers are disposed of at our local pharmacy.

Our “spare” adrenaline devices are:

- Readily accessible and not locked away. They are kept on top of the first aid cupboard
- Accessible within 5 minutes of any location in school.
- “Spare” adrenaline devices should be stored in pairs, so that if a second one is necessary it is on hand rather than needing to be obtained from elsewhere on site;
- Our “spare” adrenaline devices are clearly labelled, to avoid any confusion with adrenaline devices prescribed to a named person. Their location is marked in the school office with a

sign that says “emergency anaphylaxis kit” containing the spare adrenaline devices, any emergency asthma reliever inhaler and spacers and instructions for their use.

Visits and trips

Any children or staff attending trips - trip leaders are responsible for ensuring that any prescribed adrenaline injectors, inhalers, antihistamines or other prescribed medication is taken on the trip in a first aid bag. If classes are split in to groups on the trip, the trip leader must ensure that the adrenaline injectors and any other medications are with the member of staff who is supervising the pupils who may need them.

Risk assessments are completed for all visits and submitted to the Local Authority via the Evolve system. Any pupils and staff with medical conditions will be included as part of these risk assessments. Trip leaders must ensure that any medication, including adrenaline devices are taken with them on the trip and that staff attending are trained to administer adrenaline in an emergency.

Serious incidents and “near misses”

Serious incidents and near misses are reported to Barnsley Council via the Smartaa portal. School’s Health & Safety officer and Headteacher also complete an internal accident/incident/ near miss investigation to help review or improve policies and procedures. All first aid related incidents are also recorded using Medical Tracker.

Springvale Primary School recognise that, in some cases, the impact of exposure to an allergen while in an education setting may not be recognised until the child or young person has returned home. We ask that parents/ carers and/ or healthcare professionals inform or update us so that we may review policies, procedures and/ or IHPs if necessary.

Information sharing

Springvale Primary School will share information relating to allergies in line with our data protection policy. A child or young person’s health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Schools have a lawful basis to hold, use and share a child’s special category health data when this is necessary, but it should always be done in a controlled and respectful way, because unnecessary sharing can reduce children’s confidence in practitioners and can be embarrassing for children and young people who may not want to be singled out.

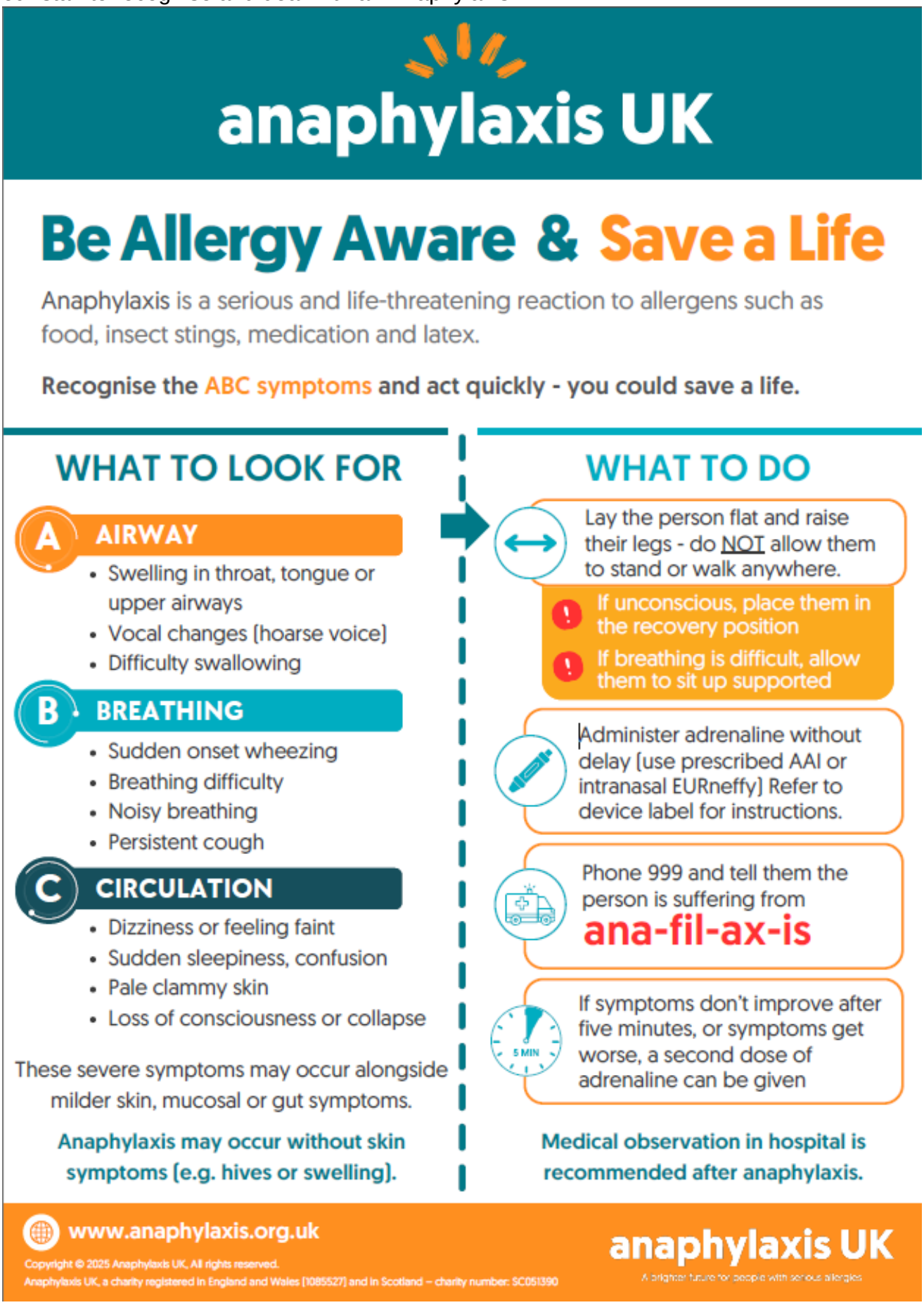
Awareness of the allergy safety policy

This policy will be shared with school staff on an annual basis and the most up to date version will always be available on our school website.

Important Links:
https://www.gov.uk/government/publications/allergy-safety-in-schools

Appendix 1

The below poster is displayed in key areas of school (staff room, dining hall, school office) to help our staff to recognise and deal with an Anaphylaxis:



Appendix 2:
Below is a copy of our IHP for pupils and our medication consent form.

Individual Healthcare Plan
Child's Name:
Date of birth:
Year / class:
Medical Condition or Allergy:
How is the condition or allergy is managed: *Note any care or action plans, prescribed medication, practical adjustments. For any medication, the below consent form is required.*
Impact on education: *Indicate how the condition/ allergy may; impact on learning, cause harm if not managed correctly, impact on emotional wellbeing and/ or any links with SEND.*
Arrangements for support: *Give details of the specific support or adaptations required, measures to reduce risk, arrangements for any missed learning due to the condition/ allergy e.g. for regular hospital visits.*

Visits and trips:

Detail any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.

Emergency response:

Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.

Emergency Contact 1 (name & phone number):

Emergency Contact 2 (name & phone number):

IHP date:

IHP Reviewed agreed and signed by:

School's H&S Officer	**Sign:**	**Name:**	**Date:**
Parent/Carer	**Sign:**	**Name:**	**Date:**
Headteacher	**Sign:**	**Name:**	**Date:**
Class Teacher	**Sign:**	**Name:**	**Date:**

Next planned review:

Prescription Medication needed while in school setting	
Name of Medication	
Expiry Date	
Dosage & Method	
Time/ Frequency required	
Storage	
Special Requirements/ additional instructions	
Known side effects	
Prescribed by	**Name:** **Date**:
Parental consent	**Sign:** **Name:** **Date**:
Use of "spare" adrenaline devices: *If relevant - parental consent to administer adrenaline (e.g. using "spare" adrenaline devices) in an emergency.*	
Parental consent:	**Sign:** **Name:** **Date**:
Use of "spare" salbutamol inhaler: *If relevant - parental consent has been given to use a "spare" salbutamol reliever inhaler in an emergency*	
Parental consent:	**Sign:** **Name:** **Date**:

Individual Healthcare Plan Care or Action Plans issued by healthcare professionals	
Allergy / Asthma Action Plan: *Attach any Action Plan to the IHP for use in an emergency.*	
Issued by:	**Date**:
Care Plan : *Note where any relevant care plan is in place.*	
Issued by:	**Date**: