Allergy Policy

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Date of last review:

Date of next review: September 2027

Created by: Mrs B Readey

1. Purpose and Aims

Ashton Primary School is committed to providing a safe, inclusive environment in which pupils with allergies can participate fully in school life.

The school recognises that allergies can range from mild conditions to potentially life-threatening anaphylaxis and must therefore be taken seriously.

This policy explains how Ashton Primary School will:

- identify pupils with allergies;
- understand their individual needs;
- reduce the risk of exposure to known allergens;
- manage food and other allergens safely;
- ensure rapid access to emergency medication;
- ensure staff are appropriately trained;
- respond promptly and effectively to allergic reactions and anaphylaxis;
- support pupils to participate fully in school life;
- record and learn from allergic reactions and near misses; and
- work effectively with pupils, parents, healthcare professionals and catering providers.

The school aims to create a culture in which allergy is understood and taken seriously without unnecessarily restricting pupils or singling them out.

No environment can be guaranteed to be completely free from allergens. Ashton Primary School will therefore use proportionate, evidence-informed controls based upon known risks and individual pupils' needs rather than making general claims that the school is completely "allergen-free".

2. Legal and Statutory Framework

This policy has been developed with regard to current legislation and statutory guidance, including:

- the Children and Families Act 2014, particularly section 100;
- the Children's Wellbeing and Schools Act 2026, particularly the new statutory allergy safety requirements introduced by section 34;
- the Department for Education's *Allergy safety in schools* statutory guidance 2026;

- the Department for Education's statutory guidance *Supporting pupils at school with medical conditions*;
- the Equality Act 2010;
- relevant food information and food safety legislation;
- the Human Medicines Regulations 2012, as amended, concerning emergency adrenaline auto-injectors in schools;
- current national guidance on the use of adrenaline auto-injectors in schools;
- data-protection legislation; and
- relevant Lancashire County Council procedures and guidance.

Ashton Primary School recognises its statutory duty to have a dedicated allergy safety policy.

The Governing Body will ensure that this policy is:

- reviewed at least annually;
- amended where necessary;
- made known within school;
- brought to the attention of pupils, parents/carers and people working within school at least annually; and
- published on the school website.

3. Scope

This policy applies to all pupils at Ashton Primary School and to school activities both on and off the school site.

This includes:

- the normal school day;
- breakfast and after-school clubs;
- lunchtimes;
- playtimes;
- PE and sport;
- cooking and food-related activities;
- educational visits;

- residential visits;
- school performances and events;
- fundraising activities;
- celebrations;
- Forest School and outdoor learning; and
- activities provided on behalf of the school.

Relevant arrangements will also apply, as appropriate, to staff, volunteers and visitors with known allergies.

4. Definitions

For the purposes of this policy:

Allergy is an immune-system response to a substance that would normally be harmless. Allergies may include food allergies and allergies to medicines, insect stings, animals, latex, plants and other contact or airborne substances.

Allergen is a substance capable of triggering an allergic reaction.

Anaphylaxis is a serious and potentially life-threatening allergic reaction requiring immediate emergency treatment.

Adrenaline auto-injector (AAI) is a medical device that delivers a measured dose of adrenaline during an anaphylactic emergency.

Near miss is an event which did not result in harm but had the potential to do so.

Individual Healthcare Plan (IHP) is an individual plan describing the support required by a pupil because of a medical condition.

Food intolerance and coeliac disease are different from food allergy but can also require careful management. The school will follow appropriate medical advice and individual arrangements for these pupils.

5. Governing Body Responsibilities

The Governing Body will ensure that:

- appropriate allergy safety arrangements are in place;
- this policy meets statutory requirements;

- the policy is reviewed at least annually;
- the policy is published on the school website;
- pupils, parents and staff are made aware of the policy;
- sufficient resources are available to manage allergy safely;
- appropriate staff training is provided;
- appropriate emergency medication arrangements are maintained;
- incidents and near misses are appropriately reviewed; and
- leaders provide appropriate assurance regarding the effectiveness of allergy arrangements.

The Governing Body will receive appropriate anonymised information regarding allergy safety without compromising individual pupils' confidentiality.

6. Headteacher and Named Senior Leader

The Headteacher retains overall responsibility for allergy safety within Ashton Primary School.

Bryony Readey, Assistant Headteacher, is the school's named senior leader for allergy safety.

The named senior leader will:

- lead implementation of this policy;
- maintain oversight of pupils with known allergies;
- ensure appropriate records are maintained;
- oversee Individual Healthcare Plans;
- ensure Allergy Action Plans are available where required;
- coordinate with parents and carers;
- liaise with healthcare professionals where appropriate;
- liaise with catering staff;
- arrange appropriate staff training;
- ensure new and temporary staff receive appropriate information;
- oversee emergency medication arrangements;
- ensure medication is appropriately checked;
- review allergic reactions and near misses;

- identify lessons arising from incidents;
- report appropriately to the Headteacher and Governing Body; and
- ensure this policy remains current.

In the absence of the named senior leader, **Laura Butterworth, Headteacher**, will provide senior leadership oversight.

Day-to-day tasks may be delegated appropriately, but overall accountability remains with school leadership.

7. Staff Responsibilities

All staff and regular volunteers with pupil-facing duties must:

- undertake required allergy training;
- understand this policy;
- know which pupils in their care have significant allergies;
- understand relevant individual arrangements;
- take reasonable steps to prevent exposure;
- recognise signs of an allergic reaction;
- know how to summon help;
- know how to locate emergency medication;
- know how to respond to suspected anaphylaxis;
- follow pupils' individual Allergy Action Plans;
- report allergic reactions;
- report near misses; and
- raise any concern regarding allergy safety promptly.

Staff must never assume that another adult will respond to an allergic emergency.

Supply, agency, peripatetic and club staff must receive appropriate information before taking responsibility for pupils with known allergy needs.

8. Parents' and Carers' Responsibilities

Parents and carers are expected to:

- provide accurate and current information regarding their child's allergy;
- explain known allergens and triggers;
- provide information regarding symptoms;
- provide emergency contact information;
- provide current medical or Allergy Action Plans;
- provide prescribed medication;
- ensure medication is in its original labelled packaging where applicable;
- ensure medication remains in date;
- replace medication before expiry;
- inform school promptly of changes to diagnosis, treatment or medication;
- provide updated action plans where these change;
- work with school when developing an IHP;
- discuss concerns regarding allergy safety with school; and
- comply with reasonable school arrangements intended to protect pupils with allergies.

Parents should not send food or products into school which conflict with allergy-safety arrangements communicated by the school.

9. Pupil Responsibilities

Pupils will be supported according to their age, development, SEND, communication needs and understanding to:

- understand their allergy;
- recognise known allergens;
- avoid known triggers;
- follow their individual plan;
- tell an adult immediately if they feel unwell;
- tell an adult if they believe they have been exposed to an allergen;
- not share food or drinks;
- not share utensils;
- not share medication; and

- respect other pupils' medical needs.

No child should ever be expected to take sole responsibility for managing a potentially life-threatening allergy.

Where a pupil is considered competent to carry and use their own medication, this will be agreed and recorded within their individual arrangements.

10. Identification of Pupils with Allergies

The school will request allergy and medical information when a pupil is admitted.

Information will also be reviewed:

- at least annually;
- when a pupil changes class;
- following a new diagnosis;
- when medication changes;
- following an allergic reaction;
- following a significant near miss; and
- whenever parents or healthcare professionals provide updated information.

Information may be obtained appropriately from:

- parents/carers;
- the pupil;
- healthcare professionals;
- previous educational settings; and
- other relevant professionals.

Relevant information will be shared with staff who need it to keep the pupil safe.

11. Allergy Records

The school will maintain an up-to-date record of pupils with known allergies.

Information may include:

- allergens;
- known triggers;

- signs and symptoms;
- severity;
- medication;
- location of medication;
- emergency contacts;
- Allergy Action Plans;
- Individual Healthcare Plans;
- reasonable adjustments; and
- other relevant information.

Information will be accessible to staff who need it while being handled in accordance with the school's Data Protection Policy.

Information will not be unnecessarily displayed or shared in a manner that compromises pupils' privacy.

12. Individual Healthcare Plans

An Individual Healthcare Plan will be developed where a pupil's allergy:

- has a functional impact upon school life;
- places the pupil at risk of harm; and
- requires arrangements additional to or different from those ordinarily available.

The plan will be developed collaboratively with the:

- pupil, where appropriate;
- parents/carers;
- relevant school staff;
- SENCo where appropriate; and
- healthcare professionals where appropriate.

The plan should address, as relevant:

- the allergy;
- allergens and triggers;
- signs and symptoms;

- preventive measures;
- medication;
- dosage;
- storage;
- access to medication;
- emergency actions;
- participation in curriculum activities;
- PE;
- lunchtimes;
- educational visits;
- clubs;
- self-management;
- information sharing;
- staff training; and
- review arrangements.

13. Allergy Action Plans

Where a healthcare professional has provided a current Allergy Action Plan, school staff will follow it.

The plan will be readily available to staff who may need to respond to the pupil.

Where appropriate, it will be clearly linked with the pupil's Individual Healthcare Plan.

Plans will be reviewed at least annually and sooner where:

- diagnosis changes;
- treatment changes;
- medication changes;
- the pupil experiences an allergic reaction;
- a significant near miss occurs;
- a healthcare professional issues an updated plan; or

- circumstances within school change significantly.

14. Staff Training

All staff who are present when pupils are scheduled to be on site will receive appropriate allergy awareness and emergency response training **at least annually**.

This includes, as applicable:

- teaching staff;
- teaching assistants;
- senior leaders;
- administrative staff;
- welfare/lunchtime staff;
- site staff;
- breakfast-club staff;
- after-school-club staff;
- temporary staff;
- supply staff;
- agency staff; and
- peripatetic staff.

New staff will receive appropriate information and training as part of induction.

Where an untrained temporary or cover member of staff is present, arrangements must ensure that they are appropriately briefed and know how to obtain immediate assistance.

15. Content of Training

Training will include:

- what allergy is;
- the potential impact of allergy;
- the difference between allergy, intolerance and coeliac disease;
- common allergens;
- individual pupil triggers;

- signs and symptoms of allergic reactions;
- recognition of anaphylaxis;
- the school's procedures;
- Individual Healthcare Plans;
- Allergy Action Plans;
- reducing exposure;
- emergency procedures;
- location of medication;
- administration of adrenaline auto-injectors;
- use of school spare AAIs;
- calling 999;
- informing parents;
- incident reporting;
- near-miss reporting; and
- practical use of relevant emergency devices.

Additional competency-based training will be provided where an individual pupil requires support beyond general allergy awareness.

The school will maintain appropriate records of training.

16. Minimising Exposure to Allergens

Ashton Primary School will take reasonable and proportionate steps to reduce exposure to known allergens.

The school recognises that completely eliminating allergens from a school environment is generally not possible.

Controls will therefore be based upon:

- known risks;
- individual pupils;
- healthcare advice;
- the nature of the allergen;

- likelihood of exposure; and
- potential severity.

Staff planning activities must consider allergy risk where relevant.

This includes:

- cooking;
- food tasting;
- celebrations;
- fundraising;
- science;
- art;
- DT;
- gardening;
- Forest School;
- animal contact;
- sensory activities;
- craft materials;
- cleaning products; and
- other activities involving potential allergens.

Suitable alternatives and reasonable adjustments will be provided where required.

17. Everyday Allergy Safety

The school will promote sensible allergy-safe behaviours.

These include:

- encouraging pupils to wash their hands before and after eating;
- cleaning tables and surfaces appropriately;
- reducing food residue on shared equipment;
- not sharing food;
- not sharing drinks;

- not sharing eating utensils;
- supervising younger pupils appropriately;
- ensuring known allergy arrangements are communicated to relevant staff;
- checking ingredients where food is used within lessons or activities; and
- considering allergen risks when introducing new resources or activities.

Individual seating or serving arrangements will only be used where necessary and proportionate.

18. Food Brought into School

Parents will be informed of relevant arrangements concerning:

- packed lunches;
- snacks;
- birthday celebrations;
- cakes;
- fundraising;
- school events;
- food donations; and
- other food brought from home.

Where particular foods or ingredients create an identified risk to a pupil, the school may ask families not to send particular products into school.

Such restrictions will be based upon identified risk and will be communicated clearly.

The school will not generally describe itself as completely "nut-free", "allergen-free" or similar because it cannot guarantee the complete absence of an allergen.

19. Catering Arrangements

School catering is provided through **Lancashire County Council**.

The school and catering provider will comply with applicable food-information and food-safety requirements.

The catering team will have appropriate information about pupils with relevant food allergies and agreed dietary arrangements.

Arrangements will ensure that:

- allergen information is available;
- menus are checked;
- ingredient information is available;
- supplier information is checked;
- substitutions are checked before use;
- appropriate storage arrangements are followed;
- cross-contact risk is minimised;
- preparation procedures are appropriate;
- serving arrangements are appropriate;
- cleaning arrangements minimise cross-contact; and
- catering staff receive appropriate training.

If there is uncertainty about whether a meal, ingredient or product is safe for a particular pupil, it must **not** be served to that pupil until its suitability has been confirmed.

A last-minute product or ingredient substitution must never be assumed to have the same allergen profile as the usual product.

20. Packed Lunches and Special Events

Allergy safety arrangements also apply to:

- packed lunches;
- class parties;
- celebrations;
- fundraising events;
- discos;
- fairs;
- sports events;
- themed days;

- parent events; and
- other occasions where food is provided.

Staff responsible for organising events involving food must consider known allergies in advance.

Food should not be offered to a pupil with an allergy unless staff are satisfied that it is safe for that pupil.

21. Non-Food Allergens

The school recognises that allergic reactions are not limited to food.

Risk assessment and planning will consider known allergies to substances including:

- medicines;
- insect stings;
- animals;
- latex;
- plants;
- cleaning products;
- craft materials;
- cosmetics;
- fragrances; and
- airborne or contact allergens.

Appropriate adjustments will be made where a known risk exists.

22. Inclusion and Wellbeing

Pupils with allergies have the right to participate fully in school life wherever this can safely be achieved.

The school recognises that living with a potentially serious allergy can cause:

- anxiety;
- fear;
- embarrassment;

- feelings of difference;
- worry about food;
- worry about social events; and
- concern about emergency reactions.

Staff will listen to pupils and involve them in decisions appropriate to their age and understanding.

Reasonable adjustments will be made to enable participation rather than unnecessarily excluding a pupil from an activity.

23. Bullying and Deliberate Exposure

Allergy-related bullying will be taken seriously.

This includes:

- teasing a pupil about their allergy;
- deliberately exposing or threatening to expose someone to an allergen;
- pressuring a pupil to eat or touch something;
- contaminating a pupil's food;
- hiding or tampering with medication;
- pretending that food contains an allergen to cause distress; or
- using a pupil's allergy to frighten, intimidate or exclude them.

Such behaviour may constitute both a behaviour and a safeguarding concern.

The school will respond under its Behaviour and Anti-Bullying arrangements and safeguarding procedures as appropriate.

24. Prescribed Emergency Medication

Pupils who have been prescribed adrenaline auto-injectors must have **rapid access** to their medication.

This applies throughout the school day and during:

- lessons;
- lunchtimes;

- playtimes;
- PE;
- outdoor learning;
- clubs;
- performances;
- school events; and
- educational visits.

Arrangements must ensure that adrenaline can be brought to the pupil **within five minutes**.

Emergency medication must therefore never be stored in a location which creates an unnecessary delay.

25. Storage of Medication

Prescribed medication is stored appropriately according to the medication and the pupil's individual arrangements.

Ashton's designated locations include:

School Office

and, where medication requires refrigeration:

Staff Kitchen – refrigerator

Emergency medication will not be stored in a locked location where this would delay access during an emergency.

Individually prescribed AAIs must be clearly labelled and readily distinguishable from the school's spare emergency devices.

Where a pupil is competent to carry their own medication, this will be agreed and recorded within their individual plan.

26. Checking Medication

Debbie Thornton is responsible for coordinating the school's arrangements for:

- school spare emergency medication;
- relevant medication records;

- medication storage; and
- associated plans.

Medication will be checked regularly to ensure that:

- it is present;
- it is correctly labelled where applicable;
- it is stored appropriately;
- packaging is intact;
- the device is in appropriate condition; and
- it remains within its expiry date.

Checks will take place regularly and before educational visits where the medication is required.

Parents remain responsible for ensuring that individually prescribed medication is replaced before expiry.

27. School Spare Adrenaline Auto-Injectors

Ashton Primary School will maintain **school spare adrenaline auto-injectors (AAIs)** for emergency use in accordance with current legislation and national guidance.

The school will ensure that:

- appropriate doses are available;
- devices are stocked in pairs where required by current guidance;
- devices are clearly identified as school emergency medication;
- they are stored safely;
- they remain rapidly accessible;
- expiry dates are checked;
- used or expired devices are replaced promptly; and
- staff know where they are located.

The number and location of emergency kits will take account of the size and layout of the school so that emergency adrenaline can reach a pupil within five minutes.

The precise location of school emergency AAIs will be clearly communicated to all staff.

28. Use of School Spare AAIs

School spare AAIs are intended as emergency backup and do not replace a pupil's own prescribed medication.

They will be used in accordance with:

- current legislation;
- statutory guidance;
- national emergency AAI guidance;
- the pupil's Allergy Action Plan where available;
- school procedures; and
- staff training.

Where a life-threatening emergency occurs involving someone not previously known to be at risk of anaphylaxis, staff will follow current national guidance and instructions from emergency services.

29. Emergency Asthma Inhaler

The school also maintains emergency asthma medication separately in accordance with its Asthma Policy and Supporting Pupils with Medical Conditions arrangements.

The school's emergency inhaler is located in the **School Office**.

Where asthma forms part of a pupil's allergic reaction or anaphylaxis arrangements, staff will follow the pupil's individual emergency plan and their training.

Adrenaline must not be delayed where anaphylaxis is suspected.

30. Recognising Anaphylaxis

Anaphylaxis can develop rapidly and can be life-threatening.

Staff must understand that anaphylaxis may involve problems with:

- **Airway**;
- **Breathing**; and/or
- **Circulation**.

Possible symptoms may include:

- swelling of the tongue or throat;
- difficulty swallowing;
- hoarse voice;
- noisy breathing;
- persistent cough;
- wheezing;
- difficulty breathing;
- dizziness;
- collapse;
- becoming pale or floppy;
- reduced consciousness; and
- other symptoms identified within the pupil's Allergy Action Plan.

Anaphylaxis can occur **without skin symptoms** such as a rash.

Staff should follow their training and the pupil's current Allergy Action Plan.

31. Responding to Suspected Anaphylaxis

Anaphylaxis is a medical emergency.

Where anaphylaxis is suspected, staff must act immediately.

If in doubt, give adrenaline.

Staff must:

1. **Stay with the pupil.** Do not leave them alone.
2. Send another person to bring the pupil's AAIs and/or school emergency AAI kit.
3. **Administer an adrenaline auto-injector without delay** in accordance with training and device instructions.
4. **Call 999 immediately** and state clearly that the pupil is experiencing **anaphylaxis**.
5. Give the school's address and relevant access information and arrange for somebody to meet the ambulance.
6. Keep the pupil **lying flat with their legs raised** where possible.
7. If the pupil is experiencing breathing difficulties, they may sit with their legs extended.

8. **Do not allow the pupil to stand or walk**, even if they appear to be improving.
9. If unconscious, place the pupil in the recovery position where appropriate. Begin CPR if there are no signs of life and follow emergency-service instructions.
10. If symptoms have not improved after **five minutes**, administer a second dose of adrenaline if another appropriate device is available.
11. Contact the pupil's parents/carers **after emergency medical assistance has been summoned**.
12. Inform the Headteacher or senior leader.
13. Provide the ambulance crew with the pupil's Allergy Action Plan and information about medication administered.

A pupil who has been given adrenaline must receive medical assessment.

They must not be left alone or simply allowed to return to normal school activities because their symptoms appear to have improved.

32. Educational Visits and Off-Site Activities

Pupils with allergies will be enabled to participate in educational visits and off-site activities wherever safe arrangements can reasonably be made.

Before the visit, the visit leader will consider:

- the pupil's individual plan;
- known allergens;
- travel;
- food;
- venues;
- accommodation where applicable;
- activity providers;
- location and remoteness;
- communication;
- access to emergency medical care;
- staff training;
- medication; and

- emergency procedures.

The pupil's prescribed emergency medication must accompany them and remain **immediately accessible**.

School spare emergency medication should also be taken where appropriate.

Medication must not be left:

- on a coach;
- on a minibus;
- in luggage;
- in accommodation;
- or in another location where it could not be immediately accessed.

At least one accompanying member of staff must be trained and confident in responding to the pupil's needs.

Medication will be checked before departure.

Where safe arrangements cannot initially be secured, school will work with the pupil, family and provider to identify reasonable adjustments rather than automatically excluding the pupil from the activity.

33. PE, Sport and Outdoor Learning

Allergy must not unnecessarily prevent a pupil from participating in PE, sport, Forest School or outdoor learning.

Relevant staff must understand the pupil's allergy and emergency arrangements.

Emergency medication must remain immediately accessible during the activity.

Where an outdoor environment presents an identified additional risk, such as:

- insect stings;
- pollen;
- plants;
- animal exposure; or
- food,

this will be considered as part of planning and risk assessment.

34. Breakfast and After-School Clubs

The requirements of this policy apply when pupils attend school-operated breakfast and after-school clubs.

Relevant club staff must:

- be aware of pupils with significant allergies;
- understand relevant individual arrangements;
- know the location of emergency medication;
- understand emergency procedures; and
- receive appropriate training.

Medication must remain accessible during club provision.

Where an external provider operates provision on the school site, appropriate allergy and safeguarding information will be shared where necessary and lawful, and responsibilities will be clearly established.

35. Supply Staff, Visitors and Contractors

Supply, agency and temporary staff taking responsibility for pupils must receive sufficient information to keep pupils with allergies safe.

This will include, where relevant:

- pupils at risk;
- allergens;
- emergency arrangements;
- medication locations; and
- how to obtain immediate assistance.

Contractors whose work could introduce or increase an allergen risk will be provided with relevant information.

Visitors will be expected to comply with reasonable school allergy-safety arrangements.

36. Allergic Reactions

All allergic reactions occurring within school or during a school activity must be appropriately responded to and recorded.

Staff will:

- follow the pupil's individual plan;
- administer medication where appropriate;
- seek medical assistance where required;
- inform parents/carers;
- inform the named senior leader; and
- make an appropriate record.

Where there is uncertainty about whether a reaction is becoming anaphylaxis, staff should follow emergency training and err on the side of safety.

37. Near Misses

A near miss is an event which could have resulted in harm even though no actual allergic reaction occurred.

Examples might include:

- a pupil nearly being served food containing their allergen;
- incorrect allergen information;
- medication not being immediately available;
- expired medication being discovered;
- incorrect food being provided;
- an ingredient substitution not being checked;
- accidental cross-contact;
- relevant information not reaching a member of staff; or
- a failure in emergency arrangements.

All significant allergy-related near misses must be reported.

Near-miss reporting is intended to improve safety, not to assign blame.

38. Recording Incidents and Near Misses

All significant:

- allergic reactions;

- anaphylaxis incidents;
- administrations of emergency adrenaline;
- emergency-service calls; and
- allergy-related near misses

must be reported to the named senior leader as soon as possible and appropriately recorded.

Reports may also be made after a pupil has returned home where delayed symptoms or additional information indicate that an exposure or incident occurred during school.

The record should provide sufficient information to understand:

- what happened;
- when and where it happened;
- the suspected allergen;
- symptoms;
- medication administered;
- timings;
- adults involved;
- emergency response;
- communication with parents;
- outcome; and
- any immediate action taken.

39. Learning from Incidents and Near Misses

Following a significant allergic reaction, anaphylaxis incident or near miss, the Headteacher or named senior leader will review what occurred.

The review will consider:

- the cause;
- whether the allergen could reasonably have been avoided;
- whether procedures were followed;
- access to medication;
- speed of response;

- staff knowledge;
- training;
- communication;
- catering arrangements;
- supervision;
- individual plans;
- environmental factors; and
- whether changes are required.

Immediate controls will be introduced where necessary.

Lessons learned will be appropriately recorded and shared with relevant staff.

Where necessary:

- the pupil's IHP will be reviewed;
- risk assessments will be changed;
- additional training will be provided;
- catering arrangements will be amended;
- emergency equipment arrangements will be changed; and/or
- this policy will be reviewed.

The Governing Body will receive appropriate anonymised assurance information.

40. Transition

Allergy safety will form part of appropriate transition arrangements when a pupil:

- starts at Ashton;
- moves class;
- moves between phases;
- transfers to another school;
- attends Alternative Provision; or
- accesses another educational setting.

Relevant information will be shared in sufficient time to enable appropriate planning and training.

Where a pupil attends another setting while remaining on Ashton's roll, the school will ensure that relevant allergy information is shared appropriately and that responsibilities for emergency arrangements are understood.

41. SEND and Communication Needs

Particular consideration will be given to pupils with SEND who may:

- have difficulty recognising symptoms;
- be unable to verbally communicate symptoms;
- have limited awareness of risk;
- find changes in food difficult;
- have sensory needs affecting eating;
- require visual communication;
- require adult support to manage medication; or
- present changes in behaviour rather than verbally reporting that they feel unwell.

Individual arrangements will take account of the pupil's communication and developmental needs.

Staff must be alert to changes in presentation or behaviour that could indicate an allergic reaction.

42. Allergy Safety in The Burrow

Pupils within **The Burrow** will receive the same high standard of allergy safety as pupils throughout the school, with arrangements adapted to their individual SEND and communication needs.

Because pupils may access:

- sensory activities;
- food-based learning;
- messy play;
- outdoor learning;

- cooking;
- tactile materials; and
- a highly personalised curriculum,

staff will consider known allergens when planning activities and selecting resources.

Where a pupil is unable reliably to recognise or communicate the early signs of an allergic reaction, staff will maintain appropriate additional vigilance.

43. Data Protection and Information Sharing

Health information is special-category personal data.

The school will collect, use, store and share allergy information:

- lawfully;
- securely;
- proportionately; and
- only where necessary.

Relevant information may be shared with:

- teaching staff;
- support staff;
- catering staff;
- club staff;
- supply staff;
- visit leaders;
- healthcare professionals;
- Alternative Provision providers;
- emergency services; and
- other people who genuinely need the information to protect or support the pupil.

Information will not be displayed or circulated more widely than necessary.

Data-protection legislation must not prevent necessary information sharing where this is required to protect a child.

44. Raising Awareness

This policy will be:

- published on the school website;
- available in hard copy on request;
- brought to the attention of staff;
- communicated to parents and carers;
- brought to pupils' attention in an age-appropriate way; and
- revisited at least annually.

Staff will revisit allergy safety through annual training.

Age-appropriate allergy education will help pupils understand:

- what allergies are;
- why some pupils must avoid particular things;
- why food should not be shared;
- why medication must never be touched;
- how to support friends;
- why allergy-related teasing is unacceptable; and
- when to seek adult help.

Pupil awareness does not replace trained adult supervision and response.

45. Complaints and Concerns

Parents/carers who have concerns regarding their child's allergy arrangements should raise them promptly with:

- the class teacher;
- named senior leader for allergy safety; or
- Headteacher.

Immediate safety concerns will be addressed without waiting for the formal complaints process.

Formal complaints will be considered under the school's Complaints Policy.

Nothing within the school's complaints procedure prevents a parent or member of staff from contacting emergency services or another appropriate external body where necessary.

46. Policy Publication

In accordance with the school's statutory allergy safety duties, Ashton Primary School will:

- make this policy generally known within school;
- make it known to parents and carers;
- take steps at least annually to bring it to the attention of pupils;
- take steps at least annually to bring it to the attention of parents/carers;
- take steps at least annually to bring it to the attention of people who work at the school, whether paid or unpaid; and
- publish it on the school's website.

47. Monitoring and Review

The effectiveness of allergy-safety arrangements will be monitored throughout the year.

This will include consideration of:

- staff training;
- allergy records;
- IHPs;
- Allergy Action Plans;
- medication availability;
- medication expiry dates;
- school spare AAIs;
- catering arrangements;
- educational visits;
- allergic reactions;
- near misses;
- emergency responses;
- pupil and parent feedback; and

- lessons arising from incidents.

This policy will be formally reviewed by the Governing Body **at least annually**.

It will be reviewed sooner where:

- a serious allergic reaction occurs;
- a significant near miss occurs;
- statutory guidance changes;
- legislation changes;
- training needs are identified;
- emergency-equipment arrangements change;
- catering arrangements change significantly;
- the school site changes; or
- evidence indicates that existing arrangements may leave a pupil at risk.

48. Related Policies

This policy should be read alongside the school's:

- Supporting Pupils with Medical Conditions Policy;
- Asthma Policy;
- Child Protection and Safeguarding Policy;
- SEND Policy;
- SEND Information Report;
- Adaptations Policy;
- First Aid Policy;
- Health and Safety Policy;
- Behaviour Policy;
- Anti-Bullying arrangements;
- Educational Visits Policy;
- Alternative Provision Policy;
- Data Protection Policy; and

- Equality Policy.