

Allergy Safety Policy

Meanwood CE Primary School



Approved by:	Board of Governors	Date: 1.09.26
Last reviewed on:	Sept 2026	
Next review due by:	Sept 2027	

Vision and Values

This school is committed to safeguarding and promoting the wellbeing of children and young people and expects all staff and volunteers to share this commitment.

In line with our vision to enrich the lives of our children emotionally, physically, spiritually, and academically, we recognize that allergy is a serious medical condition that requires a whole-school approach to ensure every person is valued, nurtured, and empowered.

At Meanwood C of E Primary School, we strive to treat everyone with respect and dignity, ensuring pupils with allergies have equal opportunities to participate fully in school life without fear of exclusion or harm.

Our vision is underpinned by Jesus' commandment to "love one another as I have loved you" (John 15:12), which drives our commitment to proactive care and the prevention of allergy-related bullying.

Aims

To ensure children are provided with a safe, "allergy-aware" environment rather than a "nut-free" one, as this encourages active risk management and provides a more robust safety net for all pupils.

We aim to provide a secure setting where allergic risks are minimized and emergency responses are immediate and effective.

Objectives

To identify all children with allergies and ensure their needs are documented through Individual Healthcare Plans (IHPs).

To provide comprehensive allergy awareness training for all staff annually.

To maintain rapid access to emergency medication, including "spare" adrenaline auto-injectors (AAIs) and asthma inhalers.

To ensure safe food provision by providing clear allergen information and following strict cross-contamination controls.

To foster a culture of inclusion where the wellbeing of allergic pupils is protected from bullying or discrimination.

Procedures

Identification and Registration

The school will maintain a record of all pupils with allergies, gathered through admissions data and liaison with parents and previous settings.

Any child whose allergy poses a risk of harm or has a functional impact will have an Individual Healthcare Plan (IHCP)

Clinical Allergy or Asthma Action Plans provided by healthcare professionals must be attached to the IHCP

A named member of the Senior Leadership Team is responsible for the implementation and annual review of this policy

Catering and Food Safety

The school's catering is provided by Impact Food Group (IFG). We follow their robust Medical Diet Process to ensure pupil safety

Online Allergen Declaration: All parents/carers must complete a food allergen declaration on the IFG online ordering system before any food can be ordered

Medical Diet Request: If an allergy or intolerance is identified, parents must complete a medical diet request form and upload medical evidence (e.g., GP letter or test results) and a colour photograph

Bespoke Menus: IFG's Operations and Support team will devise a personalised medical menu based on the current school menu cycle

Parents must review, sign, and return this menu before it is implemented

Implementation Timeline: The school and IFG aim to have medical diets in place within two weeks of initial contact

Identification at Service: Catering staff will use the provided photographs alongside secondary methods (such as coloured lanyards) to identify allergic pupils at mealtimes

Annual Review: IFG conducts an annual review over the Summer holidays to confirm that allergen information remains relevant for the start of the September term

Allergy lead

Jamie Chapman

Staff Training

All staff (including temporary and catering staff) will receive annual allergy awareness training covering symptom recognition and emergency response

Training will include how to use adrenaline devices and the location of the school's "spare" emergency kits

Medicines

Allergen pens are stored in the front office in an accessible case.

The school stocks “spare” AAls of the correct dosage (150mcg for under-6s, 300mcg for over-6s) to be used if a child’s own device is unavailable or for first-time reactions

Emergency medication must be accessible within five minutes of any location on the school site (front office).

First Aid and Emergency Response

In the event of anaphylaxis, staff will administer adrenaline immediately, dial 999, and stay with the person

Staff are protected by law when acting in good faith to save a life in an emergency

Following any serious incident, a review will be conducted to learn lessons and update the IHP or policy if necessary

Risk Assessment and Trips

A specific risk assessment will be conducted for any child at risk of anaphylaxis participating in a school trip.

Staff must ensure that pupils have their prescribed medication with them at all times when off-site

Serious Incidents and “Near Misses”

All serious incidents and “near misses” (e.g., a child being served a known allergen but catching it before ingestion) will be recorded on Appendix A

The school will report any allergen-related food safety incidents to the local authority environmental health team

Appendix A: Allergy Incident and “Near Miss” Record Form

This form should be completed as soon as feasible following any serious incident or “near miss” involving an allergy

1. KEY INFORMATION

Name of person affected: _____

Role (Pupil/Staff/Visitor): _____

Date and time of incident: _____

Location of incident: _____

Type of Event: _____

☐ Serious Incident (Harm or immediate risk of harm occurred)

☐ Near Miss (Potential for harm, but none occurred)

2. DESCRIPTION OF THE EVENT

What happened? (Describe the sequence of events):

Why did it occur? (As far as is known – e.g., cross-contamination, undeclared ingredient, medication error):

Symptoms observed: (e.g., swelling, breathing difficulty, rash, abdominal pain):

3. RESPONSE AND ACTION TAKEN

How did staff/students respond?

Medication administered? ☐ No ☐ Yes: Prescribed AAI / Spare AAI / Inhaler / Antihistamine (Circle)

Emergency Services (999) called? ☐ Yes (Time: _____) ☐ No

Outcome: (e.g., child returned to class after 60 mins observation, taken to hospital)

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4. NOTIFICATIONS AND REPORTING

Parents/Carers notified? ☐ Yes (Time: _____) ☐ No

External reporting required? ☐ Local Authority Environmental Health (for food safety incidents) ☐ HSE / RIDDOR (for work-related death or hospitalisation) ☐ Healthcare Professional (if care/action plan was involved)

5. LESSONS LEARNED REVIEW (To be completed by Senior Lead)

Could the school have reasonably foreseen this incident? _____

Might the incident have been avoided through different preventative steps? _____

Was the relevant Policy or Individual Healthcare Plan (IHP) followed? _____

Was the Policy or Plan adequate to manage this situation? _____

ACTION REQUIRED: (e.g., staff retraining, update to IHP, change in catering controls):

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Parent/Individual Comments:

Individuals involved should be given the opportunity to contribute their views to this review.

Signed (Staff Member): _____ Date: _____ Counter-
signed (Allergy Lead): _____ Date: _____