Newton Bluecoat Church of England Primary School
Mission statement

Policy Owner; Resources **Approved by Governors 9/9/26** **Next review; Autumn 2027**

ALLERGY POLICY

Newton Bluecoat Church of England Primary School
Allergy Policy 2026 – 2027

Adopted: September 2026
Next review: September 2027
Headteacher: Elizabeth Robinson
Named governor (medical & allergies): Nicola Booth
Designated Medical & Allergy Lead: Elizabeth Robinson
Back-up Designated Medical & Allergy Lead: Sarah Watson

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15. Rationale and aims

This policy sets out Newton Bluecoat CE Primary School's approach to preventing, identifying and managing allergies, including anaphylaxis. It should be read alongside the Medical Needs and Medication Policy.

We aim to:

- Prevent exposure to known allergens where reasonably practicable.
- Ensure rapid, safe responses to allergic reactions.
- Maintain a whole-school approach to allergy awareness.
- Ensure staff are trained and confident in emergency procedures.

2. Equality, inclusion and safeguarding
    - Reasonable adjustments will be made under the Equality Act 2010 so pupils are not placed at a substantial disadvantage.
    - Allergy arrangements form part of safeguarding systems.
    - The school will promote dignity, independence and pupil voice for children with allergies and will consider emotional wellbeing and potential bullying.
3. Allergy management (whole-school approach)

3.1 Identification and communication

- Allergies recorded at admission and reviewed at least annually.
- Severe allergies are recorded on a central register maintained by the Designated Medical & Allergy Lead.
- Relevant staff, supply staff and volunteers will be briefed about pupils with severe allergies before working with them.
- Designated Lead details are published on the school website and in induction materials.

3.2 Risk reduction and prevention

- The school operates allergen-aware practises for school meals, snacks, cooking lessons, trips and events.
- "No food sharing" expectation.
- Cross-contamination risks are managed and cleaning routines are specified for food activities.
- Handwashing with soap and water is promoted after food handling (hand sanitiser is not relied upon for allergen removal).
- Where needed, allergy-safe zones and individual risk assessments will be implemented in agreement with parents.

3.3 Spare Adrenaline Auto-Injectors (AAIs)

- The school maintains spare AAIs for emergency use.
- AAIs are kept in clearly marked, accessible locations; an AAI location map is maintained (Appendix B).
- Devices are checked termly for expiry and recorded.

- Spare AAIs may be used for any pupil believed to be experiencing anaphylaxis.

3.4 Pupils' own medication

- Pupils at risk of anaphylaxis must have two prescribed AAIs in school; these accompany pupils on visits.
- Parental consent for administration and use of spare AAIs is recorded.

3.5 Emergency response (anaphylaxis)
All staff must recognise symptoms and act without delay.

Procedure:

1. Give an AAI immediately (pupil's own first; use spare if required).
2. Call 999 — state "anaphylaxis".
3. Send for a second AAI if available.
4. Contact parents/carers promptly.
5. Stay with and monitor the pupil until emergency services arrive and follow their instructions.

3.6 Incident reporting and review

- All incidents and near misses are recorded and reported to senior leadership.
- The Designated Medical & Allergy Lead reviews incidents, updates IHPs and recommends risk-reduction actions.
- Serious incidents are reported to the Headteacher and Governing Body; external agencies informed where appropriate.

4. Individual Healthcare Plans (IHPs)
    - Any pupil at risk of anaphylaxis will have an IHP produced with parents and healthcare professionals.
    - IHPs include triggers, signs, medication and emergency steps, named trained staff, and risk-reduction measures for lessons, trips and clubs.
    - IHPs are reviewed annually, after incidents, or when medical information changes.
    - IHPs are shared with appropriate staff, balancing confidentiality and safety. Supply staff are briefed.
5. Staff training
    - All staff receive annual training (awareness, recognition, emergency response) including practical competency for AAIs.
    - Training is recorded and competency sign-offs are maintained. A termly check ensures sufficient trained staff for visits.
6. Educational visits
    - Required medication and a copy of the IHP must accompany the pupil on visits.
    - A specific risk assessment will be completed for visits involving pupils with allergies, with named trained staff and immediate access to medication.
    - The visit leader (or designated adult if the class teacher is absent) ensures medication is taken and accessible during the visit.
7. Home to school transport
    - Home School Liaison Officers and drivers receive basic allergen awareness training.
    - For pupils at risk of anaphylaxis, AAIs must remain with the pupil at all times during transport.
    - If in doubt on transport, staff must call 999.
8. Unacceptable practice
   The school will not:

- Prevent pupils from participating in activities unless supported by clear medical advice.
- Assume all conditions are the same or ignore medical evidence or IHPs.
- Send pupils home routinely for medical needs, require parents to administer medication, or leave pupils unsupervised in an emergency.

9. Monitoring and audit
   Termly monitoring by the Designated Lead will include:
   - AAI expiry checks.
   - Review of training records and competency.
   - Audit of IHP completion and quality.
   - Review of incident logs and near misses.
     Findings will inform policy updates and governor reports.
10. Complaints
    Raise concerns in the following order:
11. Class teacher
12. Designated Medical & Allergy Lead (Elizabeth Robinson)
13. Headteacher (Elizabeth Robinson)
    Formal complaints will follow the school's complaints procedure.
14. Policy accessibility
    - Policy published on the school website and shared with staff and parents.
    - Key allergy information included in induction and available on request.
15. Roles and responsibilities
    Governing Body
    - Ensure statutory compliance, review serious incidents and policy.

Headteacher (Elizabeth Robinson)

- Ensure implementation of the policy and staff training.

Designated Medical & Allergy Lead (Elizabeth Robinson)

- Maintain central register and IHPs, monitor AAIs and training, complete event risk assessments, liaise with catering and parents.

Back-up Lead (Sarah Waton)

- Act in the absence of the Designated Lead.

Staff

- Attend training, follow IHPs and emergency procedures, report incidents.

Parents/carers

- Provide and update accurate medical information, supply in-date medication and consent.

13. Policy review
    - Reviewed annually or earlier in response to legislation changes or serious incidents.
14. Legislation and statutory duties
    This document is written in line with:
    - Children and Families Act 2014
    - DfE: Supporting Pupils with Medical Conditions
    - Equality Act 2010
    - Human Medicines Regulations 2012

- Health and Safety at Work Act 1974
- Keeping Children Safe in Education (KCSIE)

Appendices (placeholders)
Appendix A: Allergy and Anaphylaxis Quick Guide/ Staff Briefing sheet

Appendix B: AAI location map (office) (update termly)
Appendix C: Individual Healthcare Plan (IHP) template

Appendix D: Allergy Incident Log

Approval and signatures
Approved by Governors: Date: __**9/9/26**_
Chair of Governors (print): **Andy Lang**
Headteacher signature: Elizabeth Robinson Date: 9/9/26
Designated Medical & Allergy Lead signature: Elizabeth Robinson Date: **9/9/26**

Document control
Policy reviewed and updated: 01/09/2026
Next review due: 01/09/2027
Owner: Designated Medical & Allergy Lead

Appendix A

NEWTON BLUECOAT C of E SCHOOL

AAI QUICK GUIDE FOR STAFF

ALLERGY EMERGENCY ACTION PLAN

IF A CHILD IS HAVING AN ALLERGIC REACTION

1 ASSESS — LOOK FOR:

- Difficulty breathing
- Swelling of face/tongue/throat
- Persistent coughing/wheezing
- Widespread hive-like rash
- Dizziness or collapse
- Repeated vomiting

2 GIVE AN AAI IMMEDIATELY

Pupil's own first; use school spare if needed. Follow local IHP instructions for dose/age if present.

3 CALL 999 — TELL THE OPERATOR "ANAPHYLAXIS".

4 SEND A COLLEAGUE

to fetch the second AAI and the AAI location map.

5 CONTACT PARENT/CARER

immediately.

6 STAY WITH THE CHILD,

monitor breathing and consciousness until ambulance arrives.

ALWAYS:

- ✓ Know where AAIs are kept (see right).
- ✓ Check the pupil's IHP before lesson, club or trip.
- ✓ Medication must accompany the pupil off-site — the visit leader is responsible.
- ✓ Use soap and water for handwashing after food activities — hand sanitiser does not remove allergens.
- ✓ Record every incident and report immediately to the Designated Medical & Allergy Lead.

EMERGENCY CONTACTS

School Office Phone / Out-of-Hours: [INSERT NUMBERS]

Designated Medical & Allergy Lead: **Sarah Watson** — contact via school office

Back-up Lead: **Sarah Watson**

Headteacher: **Elizabeth Robinson**

★ SHINE FROM THE INSIDE OUT

AAI LOCATION

OFFICE

Office (main reception)

AAIs are stored in: _____

Responsible staff initials: _____

TERMLY CHECKS CHECKLIST (TICK WHEN COMPLETE)

- ☐ AAI expiry dates checked and logged (termly)
- ☐ All staff training records up to date
- ☐ IHPs reviewed for pupils with allergies
- ☐ Appendix B (AAI location map) updated and circulated

TRIP CHECKLIST FOR VISIT LEADERS

Check IHPs for all pupils attending

- ☐ Ensure pupil's prescribed AAIs are packed and accessible
- ☐ Take spare AAIs listed above
- ☐ Print and carry emergency contact list and copy of IHPs (stored separately from medication)
- ☐ Ensure at least one trained member of staff accompanies the group

REPORTING AND FOLLOW-UP

- Record the incident on the school incident form and notify the Designated Medical & Allergy Lead immediately.
- The Designated Lead will review and update the pupil's IHP and recommend risk-reduction actions.

PLAIN REMINDER FOR STAFFROOM (OPTIONAL LINE)

"Know the signs. Give the pen. Call 999. Stay with the child."

SIGNATURE (FOR TRAINING COMPLETION)

I confirm I have read the quick guide and completed annual AAI competency sign-off.

Name: _____

Signature: _____

Date: _____

Appendix D:

Newton Bluecoat CE Primary School - Health Care Plan

Only needs to be completed if the pupil has a health condition that may require the school to take specific action, provide medical support, make adjustments or respond in an emergency.

Completing this Healthcare Plan

This Healthcare Plan can be completed in one of two ways:

Parents/carers may complete the form at home **and return it to the school office once completed.** Alternatively, parents/carers are very welcome to arrange a meeting with school**, where we can complete the Healthcare Plan together and discuss your child's medical needs, the support they require in school and any arrangements that need to be put in place.**

If you would prefer to complete the plan together, please contact the school office to arrange a convenient appointment on 01772 684415

Please ensure that school is informed promptly of any changes to your child's medical needs, medication or treatment so that their Healthcare Plan can be kept up to date.

PLEASE READ THE WHOLE FORM BEFORE COMPLETING. Please complete the sections that apply to the young person and attach any clinician-completed action plan where available, such as an Allergy Action Plan, Asthma Action Plan or Diabetes Care Plan. The information provided will be used to help school understand the individual arrangements needed for the pupil.

Pupil details

Pupil Full Name		**Date of Birth**	
Year		**Current Date**	
Medical diagnosis or condition		**Pupil photo** **(added by the school)**	
Main symptoms / impact in school			
Clinician / specialist involved, if applicable			

Condition overview

Condition	Does this apply?	Action plan attached?	Medication/equipment provided to school?
Allergy / anaphylaxis risk	YES / NO	YES / NO / REQUESTED	YES / NO
Asthma	YES / NO	YES / NO / REQUESTED	YES / NO

Condition	Does this apply?	Action plan attached?	Medication/equipment provided to school?
Diabetes	YES / NO	YES / NO / REQUESTED	YES / NO
Epilepsy / seizures	YES / NO	YES / NO / REQUESTED	YES / NO
Other medical condition	YES / NO	YES / NO / REQUESTED	YES / NO
Other medical conditions – please specify details here			

Allergy and intolerance information

To be completed by parents/carers for any allergy, suspected allergy, anaphylaxis risk or significant intolerance. Please attach any clinician-completed Allergy Action Plan, if available.

Information requested	Parent/carer response
Does the pupil have an allergy?	YES / NO
Allergen(s)	
Known intolerance(s), if any	
Has the pupil ever had anaphylaxis or anaphylactic shock?	YES / NO / DETAILS:
Does the pupil have their own prescribed adrenaline auto-injector? (EpiPen, Jext, Emerade or other device)	YES / NO / DEVICE NAME:
How many adrenaline auto-injector devices are prescribed?	
Does the pupil carry their own adrenaline auto-injector device?	YES / NO
I/we will provide the prescribed adrenaline auto-injector device(s) to school	YES / NO / DATE PROVIDED:
Expiry date(s) of adrenaline auto-injector device(s)	
Allergy Action Plan completed by a healthcare professional attached? School MUST have a copy of this.	YES / NO / REQUESTED
How is the allergy best managed in school? Please include food/catering arrangements, avoidance measures and anything else relevant.	
What signs or symptoms might be noticed?	

Information requested	Parent/carer response
What should happen if symptoms or exposure occur? **Please refer to the attached Allergy Action Plan if there is one.**	
Anything else parents/carers would like school to know about the allergy/intolerance	

Asthma information

To be completed by parents/carers where the pupil has asthma or asthma-like symptoms requiring support in school. Please attach any clinician-completed Asthma Action Plan, if available.

Information requested	Parent/carer response
Does the pupil have asthma?	YES / NO
Asthma Action Plan completed by a healthcare professional attached?	YES / NO / REQUESTED
Known triggers	
How is the asthma best managed in school?	
What signs or symptoms might be noticed?	
What should happen if asthma symptoms occur?	
Medication/inhaler required in school	
Does the pupil carry their own inhaler?	YES / NO
Is an additional inhaler/spacer provided to school?	YES / NO / DETAILS:
Arrangements for PE, exercise or outdoor activities	
Anything else parents/carers would like school to know about asthma	

Diabetes information

To be completed by parents/carers where the pupil has diabetes or requires blood glucose monitoring/treatment in school. Please attach any clinician-completed Diabetes Care Plan, if available.

Information requested	Parent/carer response
Does the pupil have diabetes?	YES / NO / TYPE, IF KNOWN:

Information requested	Parent/carer response
Diabetes Care Plan completed by a healthcare professional attached?	YES / NO / REQUESTED
How is the diabetes best managed in school?	
Blood glucose monitoring arrangements	
Continuous glucose monitor, insulin pump or mobile phone app used?	YES / NO / DETAILS:
Food, drink, insulin or glucose arrangements in school	
What signs or symptoms might be noticed if blood glucose is low?	
What should happen if blood glucose is low?	
What signs or symptoms might be noticed if blood glucose is high?	
What should happen if blood glucose is high?	
Equipment/medication required in school	
Does the pupil need to carry diabetes equipment/medication?	YES / NO / DETAILS:
Anything else parents/carers would like school to know about diabetes	

Epilepsy, seizures or other medical condition

Complete only if relevant. This section can also be used for another condition not covered above.

Information requested	Parent/carer response
Condition / diagnosis	
Healthcare plan or clinician letter attached?	YES / NO / REQUESTED
How is the condition best managed in school?	
What signs or symptoms might be noticed?	
What should happen if symptoms occur?	
Medication/equipment required in school	
Any arrangements for PE, trips or activities	

Emergency and school visit arrangements

Information requested	Parent/carer response
What would constitute an emergency for this pupil?	
What additional action or medical help may be needed?	
Follow-up care after an emergency	
Specific arrangements for school visits, trips or off-site activities	
Anything the pupil should always carry or have access to when off-site	

Medication and equipment summary

Medication/equipment	Condition/purpose	Dose/instructions	Carried by pupil?	Provided to school / location
			YES / NO	
			YES / NO	
			YES / NO	
			YES / NO	

A separate medication consent form should be completed for each medication that school is asked to administer or supervise.

Emergency contact information

Contact	Details	Contact	Details
Family contact 1 Name Relationship Mobile Home/work		Family contact 2 Name Relationship Mobile Home/work	
GP Name Telephone		Specialist clinician, if applicable Name Telephone	

Parent/carer declaration

Declaration	I declare that the information given in this Health Care Plan is correct to the best of my knowledge. I will inform the school immediately if there is any change in my young person's condition, treatment, medication or equipment.
Parent/carer full name	
Today's date	
Next planned review to be completed by the school	

Please return the completed Health Care Plan to:
office@newtonbluecoat.lancs.sch.uk

Appendix D:

Allergy Incident Log

This log is to keep a record of ALL incidents relating to allergy e.g. drug box not in correct place, any type of allergic reaction, any 'near miss' event. Note: This document will be reported to governors on a termly basis. Any anaphylactic reaction will be communicated to the Chair of Governors within 24 hours.

Date of incident	Type of incident 1 - near miss 2 - allergic reaction 3 - other	Description Include details e.g. Adult reporting, location, cause of reaction (allergen and type of contact, if known,).	Pupil(s) affected	Action taken (+ date) e.g. feedback to staff, further training, entered onto CPOMs, parents informed / sent home / monitored / ambulance called	Learning Point(s)
