BISHOP HEBER HIGH SCHOOL

RESPECT · OPPORTUNITY · ACHIEVEMENT

ALLERGY MANAGEMENT POLICY

Author/s	Maura Nesbitt
Review Frequency	Annually The policy will also be reviewed following any serious allergy-related incident or where learning from a near miss identifies the need for procedural improvement.
Date approved by Governors	February 2026
Date of next review	September 2026 in line with Supporting Students with Medical Needs Policy
Purpose	To minimise the risk of any student suffering a severe allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage severe allergic reactions should they arise. This policy also aims to promote allergy awareness across the school community, reduce the likelihood of exposure to known allergens, support the wellbeing and inclusion of students with allergies, and establish clear arrangements for emergency response, incident reporting and continual improvement.
Links with other policies (available on the school website)	Supporting Students with Medical Needs Policy Educational Trips, Visits & Exchanges Policy Behaviour & Discipline Policy

The Business Manager and Assistant Headteacher i/c CPD are the named staff members responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy.

The Business Manager (Mrs M Nesbitt) is the appointed designated Allergy Safety Lead from the Senior Leadership Team.

The Allergy Safety Lead is responsible for:

- implementation and review of the Allergy Management Policy
- monitoring allergy incidents and near misses
- maintaining oversight of allergy records
- promoting allergy awareness in conjunction with the Assistant Manager i/c CPD
- ensuring appropriate staff training
- reviewing lessons learned from incidents and recommending improvements.

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1. Introduction

An allergy is a reaction by the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis.

Anaphylaxis is a severe systemic allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes often include foods, insect stings, or drugs.

Definition: *Anaphylaxis is a severe life threatening generalised or systemic hypersensitivity reaction.* This is characterised by rapidly developing life-threatening airway / breathing / circulatory problems usually associated with skin or mucosal changes.

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but not limited to): Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how Bishop Heber High School will support students with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

ALLERGY MANAGEMENT POLICY

The legislation specific to this appendix is:

- Children's Wellbeing and Schools Act 2026
- Food Information Regulations 2014
- Food Information (Amendment) (England) Regulations 2019
- DfE Statutory Guidance on Allergy Safety in Schools (2026).

2. Role and Responsibilities

2.1 Parent responsibilities

- On entry to the school, it is the parent's responsibility to the SENDCo to inform the school of any allergies. This information should include all previous severe allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents / Carers are to supply a copy of their child's Allergy Action Plan to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional
- Parents / Carers are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents / Carers are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

2.2 Staff Responsibilities

- All staff will complete allergy awareness and anaphylaxis training.
- This training will be undertaken at least annually and as part of induction for new staff.
- The training expectation applies to teaching staff, support staff, supply staff, agency staff, volunteers, catering staff and those supervising extracurricular provision.
- Training is provided for all first aid trained staff on a yearly basis and on an ad-hoc basis for any new members of staff.
- Staff must be aware of the students in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due diligence.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all students with medical conditions, including allergies, carry their medication. **Students unable to produce their required medication will not be able to attend the excursion.**
- The SENDCO will ensure that the up-to-date Allergy Action Plan is kept with the student's medication.
- Information relating to allergies is special category personal data and will be processed in accordance with UK GDPR and the school's Data Protection Policy.
- Relevant information will be shared with staff on a need-to-know basis to support the health, safety and wellbeing of students.

- **It is the parent's / carer's responsibility to ensure all medication is in date.** However, the Student Services First Aider will check medication kept at school on a termly basis and send a reminder to Parents / Carers / if medication is approaching expiry.
- The Student Services Administrator keeps a register of students who have been prescribed an Adrenaline Auto-Injector (AAI) and a record of use of any AAI(s) and emergency treatment given.

2.3 Student Responsibilities

- Students are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- Students who are trained and confident to administer their own auto-injectors will be encouraged to take responsibility for carrying them on their person at all times.

3. Allergy Action Plans

Allergy action plans are designed to function as Individual Healthcare Plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto- injector.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.
https://heberorg-my.sharepoint.com/personal/mnesbitt_heber_org_uk/Documents/Documents/Governors/2025-2026/REP/BSACI-AllergyActionPlan-EpiPen.pdf

3A. Register of Students with Allergies

The school maintains a register of students with diagnosed or suspected allergies.

This register includes:

- known allergens
- prescribed medication and devices
- allergy action plans
- parental consent arrangements
- emergency contact information

Information is held securely on Arbor and is accessible to relevant staff in order to facilitate a timely emergency response.

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4. Emergency Treatment and Management of Anaphylaxis

What to look for:

- swelling of the mouth or throat
- difficulty swallowing or speaking
- difficulty breathing
- sudden collapse / unconsciousness
- hives, rash anywhere on the body
- abdominal pain, nausea, vomiting
- sudden feeling of weakness
- strong feelings of impending doom

Anaphylaxis is likely if all of the following 3 things happen:

- **sudden onset** (a reaction can start within minutes) and **rapid progression of symptoms**
- **life threatening airway and/or breathing difficulties** and/or **circulation problems** (e.g. alteration in heart rate, sudden drop in blood pressure, feeling of weakness)
- **changes to the skin** e.g. flushing, urticaria (an itchy, red, swollen skin eruption showing markings like nettle rash or hives), angioedema (swelling or puffing of the deeper layers of skin and/or soft tissues, often lips, mouth, face etc.) Note: skin changes on their own are not a sign of an anaphylactic reaction, and in some cases don't occur at all

If the student has been **exposed to something they are known to be allergic to,** then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment and it starts to work within seconds. Adrenaline should be administered by an **injection into the muscle** (intramuscular injection). Staff are able to search a student's belongings for their EpiPen/medication.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

Adrenaline must be administered with the **minimum of delay** as it is more effective in preventing an allergic reaction from progressing to anaphylaxis than in reversing it once the symptoms have become severe.

ACTION:

- Stay with the child and call for help. **DO NOT MOVE CHILD OR LEAVE UNATTENDED**
- Remove trigger if possible (e.g. Insect stinger)
- Lie child flat (with or without legs elevated) – a sitting position may make breathing easier
- **USE ADRENALINE WITHOUT DELAY** and note time given. (inject at upper, outer thigh - through clothing if necessary)
- CALL **999** and state **ANAPHYLAXIS**
- If no improvement after 5 minutes, administer second adrenaline auto-injector
- If no signs of life commence CPR
- Phone parent/carer as soon as possible

All students must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

5. Incident Reporting and Review

A serious incident is any allergy-related event which results in harm or creates an immediate and significant risk of harm.

A near miss is an event which did not result in harm but had the clear potential to do so.
Examples may include:

- incorrect meal provision
- cross contamination
- unavailable medication
- expired medication identified before use
- failure to communicate allergy information

All serious incidents and near misses will be recorded and reviewed by the Allergy Safety Lead.

Learning points identified will be shared appropriately with staff and may result in revisions to Healthcare Plans, risk assessments or school procedures.

6. Supply, storage and care of medication

(Around age 11 years +) Students will be encouraged to take responsibility for and to always carry their own two adrenaline injectors on them (in a suitable bag/ container).

Older children and medication

Older children and teenagers should, whenever possible, assume complete responsibility for their emergency kit under the responsibility of their Parents / Carers.

However, symptoms of anaphylaxis can come on **very suddenly**, so school staff need to be prepared to administer medication if the young person cannot.

Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a specialist collection service. The sharps bin is kept in the Student Service Office.

7. 'Spare' adrenaline auto injectors in school

Bishop Heber High School has purchased spare **adrenaline auto-injector (AAI) devices for emergency use in children who are risk of anaphylaxis,** but their own devices are not available or not working or out of date.

These are stored in a green rigid box, clearly labelled "Emergency Anaphylaxis" Adrenaline Pen', kept safely, not locked away and **accessible and known to all staff.**

Bishop Heber High School holds two spare pens which are kept in the following locations, both of which have signage stating pens are there:

- **Student Services Office**
- **Site Manger's Office**

The Student Services Administrator (First Aider) is responsible for checking the spare medication is in date on a monthly basis and to replace as needed. Written parental permission for use of the spare AAIs is included in the student's Allergy Action Plan. If anaphylaxis is suspected **in an undiagnosed individual** call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

8. Staff Training

The Business Manager and Assistant Headteacher i/c CPD are the named staff members responsible for co-ordinating all staff training and the upkeep of the school's Allergy Management policy. All staff receive and complete Allergy Awareness Training via the National College.

External First Aid trainer conducts practical anaphylaxis training as part of the one day first aid course.

All our first aid trained staff therefore have had anaphylaxis awareness training along with a practical session on how to use an EpiPen .

Training includes:

- Knowing the common allergens and triggers of allergy
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
- Administering emergency treatment (including AAIs) in the event of anaphylaxis –knowing how and when to administer the medication/device
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance Knowing who is responsible for what
- Associated conditions e.g. asthma
- Managing allergy action plans and ensuring these are up to date
- A practical session using trainer devices (these can be obtained from the manufacturers' websites www.epipen.co.uk and www.jext.co.uk)

9. Inclusion and Safeguarding

Bishop Heber High School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

10. Wellbeing

The school recognises that students with allergies may experience anxiety, social isolation, or bullying linked to their medical condition.

Students requiring additional support will be able to access pastoral support through their Form Tutor, Year Leader, SENDCo or other appropriate staff member.

Any allergy-related bullying or discrimination will be addressed in accordance with the Behaviour Policy and Anti-Bullying procedures.

Following a serious allergic reaction or near miss, the school will consider whether additional pastoral support is appropriate for the student, family or staff involved.

11. Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

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The school menu is available for Parents / Carers to view in weekly/fortnightly/monthly advance with all ingredients listed and allergens highlighted on the school website at Bishop Heber High School, Cheshire | Prêt d'accomplir

The SENCO and First Aider will inform the Catering Manager of students with food allergies. This information is also held on the MIS (Arbor) and will show on the student's account on the Cunningham's Catering MIS. Parents / Carers are encouraged to meet with the Catering Manager to discuss their child's needs.

For further information, Parents/Carers should liaise with their child's Form Tutor

The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by Parents / Carers for students with food allergies should be clearly labelled with the name of the child for whom they are intended.
- If food is purchased from the school canteen/tuck shop, Parents / Carers should check the appropriateness of foods by speaking directly to the catering manager.
- The student should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include - preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.
- Foods containing nuts are discouraged from being brought in to school.
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

12. Educational Trips, Visits and Exchanges

Staff leading school trips / visits / exchanges will ensure they carry all relevant emergency supplies. Trip leaders will check that all students with medical conditions, including allergies, carry their medication. **Students unable to produce their required medication will not be able to attend the excursion.**

All the activities on the school trip / visit / exchange will be risk assessed to see if they pose a threat to allergic students and alternative activities planned to ensure inclusion.

Overnight school trips may be possible with careful planning and a meeting for Parents / Carers with the lead member of staff planning the trip / visit / exchange should be arranged. Staff at the venue for an overnight school trip, visit or exchange should be briefed early on that a child with an allergy is attending and will need appropriate food (if provided by the venue).

Sports Fixtures

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation.

The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team. If another school feels that they are not equipped to cater for any food-allergic child, the school will arrange for the child to take alternative/their own food.

Most Parents / Carers are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

13. Allergy Awareness

Bishop Heber High School supports the approach advocated by The Anaphylaxis Campaign and Allergy UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect students, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

A 'whole school awareness of allergies' is a much better approach, as it ensures teachers, students and all other staff aware of what allergies are, the importance of avoiding the students' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk. Allergy Awareness is delivered to students as part of the PSHCE programme.

14. Risk Assessment

Bishop Heber High School will conduct a detailed risk assessment to help identify any gaps in our systems and processes for keeping allergic children safe for all new students joining with allergies and any students newly diagnosed.

Specific risk assessments should be completed where relevant for:

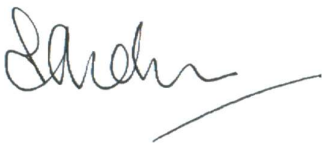
- food technology lessons
- science experiments involving food
- school trips and residential visits
- animal handling experiences
- practical activities involving food ingredients
- catering activities
- situations involving assistance dogs where a student has a significant animal allergy

15. Useful Links

- Allergy School Welcome to NARF Allergy School, Teaching Children About Food Allergies
- Anaphylaxis Campaign- https://www.anaphylaxis.org.uk
- AllergyWise training for schools - https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-schools/
- AllergyWise training for Healthcare Professionals https://www.anaphylaxis.org.uk/information-training/allergywise-training/for- healthcare-professionals/
- Allergy UK - https://www.allergyuk.org
- Whole school allergy and awareness management (Allergy UK) https://www.allergyuk.org/schools/whole-school-allergy-awareness- andmanagement
- Spare Pens in Schools - http://www.sparepensinschools.uk
- Official guidance relating to supporting students with medical needs in schools: http://medicalconditionsatschool.org.uk/documents/Legal-Situation-in-Schools.pdf
- Education for Health http://www.educationforhealth.org
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016) https://www.nice.org.uk/guidance/qs118
- Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020) https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834
- Guidance on the use of adrenaline auto-injectors in schools (Department of Health, 2017) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf

School Policies

- Educational Trips, Visits and Exchanges Policy | Bishop Heber High School
- Supporting Students With Medical Conditions Policy | Bishop Heber High School
- Behaviour & Discipline Policy





Signed: Mrs S Anderson (Chair of Governors) **Mr D Curry (Headteacher)**

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ALLERGY MANAGEMENT POLICY

Administration Use:	
Statutory/Non-Statutory:	Statutory
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