The Societas Trust

Allergen and Anaphylaxis Policy

Date of Policy	2025
Reviewed and Agreed by	The Directors Board
Review Date	16 October 2024
Review Date	15 October 2025
Next Review Date	Autumn 2026

Contents:

Statement of intent

Goldenhill Primary Academy strives to ensure the safety and wellbeing of all members of the school community. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school.

In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The school does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

1. Legal framework

1.1. This policy has due regard to legislation and government guidance including, but not limited to, the following:

- Children and Families Act 2014
- The Human Medicines (Amendment) Regulations 2017
- The food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2023) 'Allergy Guidance for Schools'

1.2. This policy will be implemented in conjunction with the following school policies and documents:

- **Health and Safety Policy**
- **Medical Conditions Policy**
- **Educational Visits and School Trips Policy**

2. Definitions

For the purpose of this policy:

2.1. **Allergy** – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.

2.2. **Allergen** – is a normally harmless substance that triggers an allergic reaction for a susceptible person.

2.3. **Allergic reaction** – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:

- Hives
- Generalised flushing of the skin
- Itching and tingling of the skin
- Tingling in and around the mouth
- Burning sensation in the mouth
- Swelling of the throat, mouth or face
- Feeling wheezy
- Abdominal pain
- Rising anxiety
- Nausea and vomiting
- Alterations in heart rate
- Feeling of weakness

2.4. **Anaphylaxis** – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:

- Persistent Cough
- Throat Tightness
- Change in Voice e.g. hoarse or croaky sounds
- Wheeze (whistling noise due to a narrowed airway)
- Difficulty swallowing/speaking
- Difficult or noisy breathing
- Feeling dizzy or faint
- Reduced level of consciousness
- Lips turning blue
- Swollen tongue
- Chest tightness
- Feeling dizzy or feint
- Suddenly becoming sleepy, unconscious or collapsing
- Becoming inresponsive
- **[EYFS and primary schools]** For infants and younger pupils, becoming pale or floppy

3. Roles and responsibilities

3.1. The headteacher is responsible for:

- The development, implementation and monitoring of the Allergen and Anaphylaxis Policy.
- Ensuring that parents are informed of their responsibilities in relation to their child's allergies.

- Ensuring that all school trips are planned in accordance with the **Educational Visits and School Trips Policy**, taking into account any potential risks the activities involved pose to pupils with known allergies.
- Ensuring that all designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all relevant risk assessment, e.g to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
- Ensuring that catering staff are aware of, and act in accordance with, the setting's policies regarding food and hygiene, including this policy.
- Ensuring that catering staff are aware of any pupils' allergies which may affect the meals provided.
- Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff.
- Seeking up-to-date medical information about each pupil via a medical form sent out to parents on an annual basis, including information regarding any allergies.
- Contacting parents for required medical documentation regarding a pupil's allergy.

3.2. All staff members are responsible for:

- Acting in accordance with the setting's policies and procedures at all times.
- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual healthcare plans (IHPs) as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Promoting hand washing before and after eating.
- Monitoring all food supplied to pupils by both the school and parents, including snacks, ensuring food containing known allergens is not provided.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.

- Ensuring that any necessary medication are out of the reach of pupils but still easily accessible to staff members.

3.3. All parents are responsible for:

- Notifying the setting of the following information:
  - Their child's allergens
  - The nature of the allergic reaction
  - What medication to administer
  - Specified control measures and what can be done to prevent the occurrence of an allergic reaction
- Keeping the setting up-to-date with their child's medical information.
- Providing written consent for the use of a spare AAI.
- Providing the setting with up-to-date emergency contact information.
- Providing the setting with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Providing the setting with any necessary medication, in line with the procedures outlined in the **Medical Conditions Policy**.
- Communicating to the setting any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen.
- Providing the setting, in writing, any details regarding the child's allergies.
- Working alongside the setting to develop a care plan to accommodate the child's needs, as well as undertaking the necessary risk assessments.
- Signing their child's care plan, where required.
- Acting in accordance with any allergy-related requests made by the setting, such as not providing nut-containing items in their child's packed lunch.
- Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
- Providing a supply of 'safe' snacks for any individual attending setting events.
- Raising any concerns they may have about the management of their child's allergies with the **headteacher.**
- Ensuring that any food their child brings to setting is safe for them to consume.

- Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided.

3.4. All pupils are responsible (in accordance with their age) for :

- Ensuring that they do not exchange food with other pupils.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Being proactive in the care and management of their allergies.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- Learning to recognise personal symptoms of an allergic reaction.
- Keeping necessary medications in an agreed location which members of staff are aware of.
- Developing greater independence in keeping themselves safe from allergens.
- Notifying a staff member if they are being bullied or harassed as a result of their allergies.

The catering manager is responsible for:

- Monitoring the food allergen log and allergen tracking information for completeness.
- Reporting any non-conforming food labelling to the supplier, where necessary.
- Ensuring the practices of kitchen staff comply with food allergen labelling laws and that training is regularly reviewed and updated.
- Recording incidents of non-conformity, either in allergen labelling, use of ingredients or safe staff practice, in an allergen incident log.
- Acting on entries to the allergen incident log and ensuring the risks of recurrence are minimised.

Kitchen staff are responsible for:

- Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with section4 and section 5 of this policy, and the processes for identifying pupils with specific dietary requirements.

- Ensuring they are fully aware of whether each item of food served contains any of the main 14 allergens, as is a legal obligation, and making sure this information is readily available for those who may need it.

- Ensuring that the required food labelling is complete, correct, clearly legible, and is either printed on the food packaging or attached via a secure label.
- Reporting to the Catering manager if food labelling fails to comply with the law.

4. Food allergies

4.1. Parents will provide the setting with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

4.2. Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the setting's catering service.

4.3. When making changes to menus or substituting food products, the school will ensure that pupils' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible.

The school will ensure that there are always dairy- and gluten-free options available for pupils with allergies and intolerances.

[Government guidance states that schools should have clear processes to help catering staff to identify pupils with specific dietary requirements. The following point is an example of an FSA-approved process of identification, and should be amended to fit the process your school has adopted. More information about identifying dietary needs can be found here.]

In schools, kitchen staff will need to be able to easily identify those with specific dietary requirements.

Practices to identify children with dietary needs could be as simple as:

- a photograph of the child alongside details of their allergy in the kitchen or serving area

4.4. a key on the wall explaining the colours will be displayed on the wall in the serving area so that it is visible to all kitchen staff. All food tables will be cleaned appropriately before and after being used.

4.5. Anti-bacterial wipes and cleaning fluid will be used.

4.6. Boards and knives for fruit and vegetables will be a different colour to the rest of the kitchen boards and knives in order to remind kitchen to prevent cross-contamination.

4.7. Any sponges or cloths that are used for cleaning will be colour-coded according to the areas that they are used to clean, e.g. a red sponge for an area that has been used for raw meat.

4.8. staff to keep them separate.

4.9. There will be a set of kitchen utensils that are only for use with the food and drink of the pupils at risk if a severe allergy.

4.10. There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products – if there is a severe allergy.

4.11. Food items containing bread and wheat will be stored separately.

5. Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved. **Food allergen labelling**

The school will adhere to new allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019, also known as Natasha's Law.

The school will ensure that all pre-packaged food is labelled accurately, that food is never labelled as being 'free from' an ingredient unless staff are certain that there are no traces of that ingredient in the product, and that all labelling is checked before being offered for consumption.

The relevant staff, e.g. kitchen staff, will be trained prior to storing, handling, preparing, cooking and/or serving food to ensure they are aware of their legal obligations. Training will be reviewed on an annual basis, or as soon as there are any revisions to related guidance or legislation.

Food labelling

Food goods classed as 'pre-packed for direct sale' (PPDS) will clearly display the following information on the packaging:

- The name of the food

- The full ingredients list, with ingredients that are allergens emphasised, e.g. in bold, italics, or a different colour

The school will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded, upon delivery, in a food allergen log stored **in the kitchen**
- Allergen tracking will continue throughout the school's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a **weekly** basis by the kitchen manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident log and managed by the kitchen manager

Changes to ingredients and food packaging

The school will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

6. Animal allergies

6.1. Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

6.2. In the event of an animal on the site, staff members will be made aware of any pupils who this may pose a risk to and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

7. Seasonal allergies

7.1. The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.

7.2. Precautions regarding the prevention of seasonal allergies include ensuring that the school grass is not mown whilst pupils are outside.

7.3. Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.

7.4. Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

7.5. Pupils will be encouraged to wash their hands after playing outside.

7.6. Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the headteacher/site manager.

7.7. The headteacher/site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.

7.8. Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

8. Adrenaline auto-injectors (AAIs)

8.1. Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

8.2. Under The Human Medicines (Amendment) Regulations 2017 the schools is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.The school will purchase AAIs in accordance with age-based criteria, relevant to the age of pupils at risk of anaphylaxis, to ensure the correct dosage requirements are adhered to. These are as follows:

- For pupils under age 6: 0.15 milligrams of adrenaline
- For pupils aged 6-12: 0.3 milligrams of adrenaline

8.3. Spare AAIs are stored as part of an emergency anaphylaxis kit, which includes the following:

- One or more AAIs
- Instructions on how to use the device(s)
- Instructions on the storage of the device(s)
- Manufacturer's information
- A checklist of injectors, identified by the batch number and expiry date, alongside records of monthly checks
- A note of the arrangements for replacing the injectors
- A list of pupils to whom the AAI can be administered
- An administration record

8.4. Spare AAIs are not located more than **five** minutes away from where they may be required. The emergency anaphylaxis kit(s) can be found in the first aid cabinet in the office.

8.5. All staff have access to AAI devices, but these are out of reach and inaccessible to pupils – AAI devices are not locked away where access is restricted.

8.6. All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

8.7. In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.

8.8. The following staff members are responsible for maintaining the emergency anaphylaxis kit(s):

- Academy Business Manager

8.9. The above staff members conduct a monthly check of the emergency anaphylaxis kit(s) to ensure that:

- Spare AAI devices are present and have not expired.
- Replacement AAIs are obtained when expiry dates are approaching.

8.10. Any used or expired AAIs are disposed of after use in accordance with manufacturer's instructions.

8.11. Used AAIs may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with section 12 of this policy.

8.12. Where any AAIs are used, the following information will be recorded on the AAI Record:

- Where and when the reaction took place
- How much medication was given and by whom

9. Access to spare AAIs

9.1. A spare AAI can be administered as a substitute for a pupil's own prescribed AAI, if this cannot be administered correctly, without delay.

9.2. Spare AAIs are only accessible to pupils for whom medical authorisation and written parental consent has been provided – this includes pupils at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.

9.3. Consent will be obtained as part of the introduction or development of a pupil's IHP.

9.4. If consent has been given to administer a spare AAI to a pupil, this will be recorded in their IHP.

9.5. The school uses a register of pupils (**Register of AAIs**) to whom spare AAIs can be administered – this includes the following:

- Name of pupil
- Class
- Known allergens
- Risk factors for anaphylaxis
- Whether medical authorisation has been received

- Whether written parental consent has been received
- Dosage requirements

9.6. Parents are required to provide consent on an annual basis to ensure the register remains up-to-date.

9.7. Parents can withdraw their consent at any time. To do so, they must write to the headteacher.

9.8. The headteacher checks the register is up-to-date on an annual basis.

9.9. The headteacher will also update the register relevant to any changes in consent or a pupil's requirements.

9.10. Copies of the register are held in the care plan folder in the office, which is accessible to all staff members.

10. School Trips

10.1 The headteacher will ensure a risk assessment is conducted for each school trip to address pupils with known allergies attending. All activities on the school trip will be risk assessed to see if they pose a threat to any pupils with allergies and alternative activities will be planned where necessary to ensure the pupils are included.

10.2 The school will speak to the parents of pupils with allergies where appropriate to ensure their co-operation with any special arrangements required for the trip.

10.3 A designated adult will be available to support the pupil at all times during a school trip.

10.4 If the pupil has been prescribed an AAI, at least one adult trained in administering the device will attend the trip. The pupil's medication will be taken on the trip and stored securely – if the pupil does not bring their medication, they will not be allowed to attend the trip.

10.5 A member of staff will be assigned responsibility for ensuring that the pupil's medication is carried at all times throughout the trip.

10.6 Two AAIs will be taken on the trip and will be easily accessible at all times.

10.7 Where the venue or site being visited cannot assure appropriate food can be provided to cater for pupils' allergies, the pupil will take their own food or the school will provide a suitable packed lunch.

11. Medical attention and required support

11.1. Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents, the headteacher and any other relevant staff members, in which the pupil's allergies will be discussed and a plan of appropriate action/support will be developed.

11.2. All medical attention, including that in relation to administering medication, will be conducted in accordance with the **Medical Conditions Policy**.

11.3. Parents will provide the setting with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.

11.4. Pupils will not be able to attend nursery/school or educational visits without any life-saving medication that they may have, such as AAIs.

11.5. All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.

11.6. Any specified support which the pupil may require is outlined in their IHP.

11.7. All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's care plan.

11.8. The headteacher is responsible for working alongside relevant staff members and parents in order to develop IHPs for pupils with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.

11.9. The headteacher has overall responsibility for ensuring that care plans are implemented, monitored and communicated to the relevant members of the school community.

12. Staff training

12.1. Designated staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so.

12.2. In accordance with the **Medical Conditions Policy,** staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

12.3. The school will arrange specialist training where a pupil in the school has been diagnosed as being at risk of anaphylaxis.

12.4. The relevant staff, e.g. kitchen staff, will be trained on how to identify and monitor the correct food labelling and how to manage the removal and disposal of PPDS foods that do not meet the requirements set out in Natasha's Law.

12.5. The relevant members of staff will be trained on how to consistently and accurately trace allergen-containing food routes through the school, from supplier delivery to consumption.

12.6. Designated staff members will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAIs according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.

12.7. All staff members will:

- Be trained to recognise the range of signs and symptoms of an allergic reaction.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild-moderate symptoms.
- Understand that AAIs should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a pupil is on the **Register of AAIs**.
- Understand how to access AAIs.
- Understand who the designated members of staff are, and how to access their help.
- Understand that it may be necessary for staff members other than designated staff members to administer AAIs, e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation.
- Be aware of how to administer an AAI should it be necessary.
- Be aware of the provisions of this Allergen and Anaphylaxis Policy.

13. In the event of a mild-moderate allergic reaction

13.1. Mild-moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

13.2. If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and refer to their IHP to determine the next steps and call for help from the designated staff members able to administer AAIs via a walkie talkie.

13.3. The pupil's prescribed AAI will be administered by the designated staff member. Spare AAIs will only be administered where appropriate consent has been received.

13.4. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI.

13.5. A copy of the **Register of AAIs** will be held in the Care Plan folder in the office and class inhaler/AAI box for easy access in the event of an allergic reaction.

13.6. If necessary, other staff members may assist the designated staff members with administering AAIs.

13.7. The pupil's parents will be contacted immediately if a pupil suffers a mild-moderate allergic reaction, and if an AAI has been administered.

13.8. In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

13.9. For mild-moderate allergy symptoms, the AAI will usually be sufficient for the reaction; however, the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.

13.10. Should the reaction progress into anaphylaxis, the school will act in accordance with section 12 of this policy. Where the pupil is required to go to hospital, an ambulance will be called

13.11. The headteacher will ensure that any designated staff member required to administer an AAI has appropriate cover in place, e.g. if they were teaching a class at the time of the reaction.

14. In the event of anaphylaxis

14.1. Anaphylaxis symptoms include the following:

- Persistent cough
- Hoarse voice
- Difficulty swallowing, or swollen tongue
- Difficult or noisy breathing
- Persistent dizziness
- Becoming pale or floppy
- Suddenly becoming sleepy, unconscious or collapsing

14.2. In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor with their legs raised, and will call for help from a designated staff member via a walkie talkie.

14.3. The designated staff member will administer an AAI to the pupil. Spare AAIs will only be administered if appropriate consent has been received.

14.4. Where there is any delay in contacting designated staff members, the nearest staff member will administer the AAI.

14.5. A copy of the **Register of AAIs** will be held in the Inhaler/AAI Box for easy access in the event of an allergic reaction.

14.6. If necessary, other staff members may assist the designated staff members with administering AAIs.

14.7. The emergency services will be contacted immediately.

14.8. A member of staff will stay with the pupil until the emergency services arrive – the pupil will remain lay flat and still. If the pupil's condition deteriorates after initially calling the emergency services, a second call will be made to ensure an ambulance has been dispatched.

14.9. The **headteacher** will be contacted immediately, as well as a suitably trained individual, such as a **first aider**.

14.10. If the pupil stops breathing, a suitably trained member of staff will administer CPR.

14.11. If there is no improvement after five minutes, a further dose of adrenaline will be administered using another AAI, if available.

14.12. In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

14.13. A designated staff member will contact the pupil's parents as soon as is possible.

14.14. Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the pupil has
- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

14.15. Any used AAIs will be given to paramedics.

14.16. Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.

14.17. Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.

14.18. A member of staff will accompany the pupil to hospital in the absence of their parents.

14.19. If a pupil is taken to hospital by car, **two** members of staff will accompany them.

14.20. A copy of the Register of AAIs will be held in each classroom for easy access in the event of an allergic reaction.

14.21. Following the occurrence of an allergic reaction, the **senior leadership team**, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

15. Monitoring and review

15.1. The headteacher is responsible for reviewing this policy annually.

15.2. The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher immediately.

15.3. Following each occurrence of an allergic reaction, this policy and pupils' care plans will be updated and amended as necessary.

Appendix 1 - Pupil allergy declaration form

Name of pupil			
Date of birth		**Year group**	
Name of GP			
Address of GP			

Nature of allergy	
Severity of allergy	
Symptoms of an adverse reaction	
Details of required medical attention	
Instructions for administering medication	
Control measures to avoid an adverse reaction	

Spare AAIs

I understand that the setting may purchase spare AAIs to be used in the event of an emergency allergic reaction. I also understand that, in the event of my child's prescribed AAI not working, it may be necessary for the school to administer a spare AAI, but this is only possible with medical authorisation and my written consent.

In light of the above, I provide consent for the setting to administer a spare AAI to my child.

Yes	☐	**No**	☐

Name of parent:	
Relationship to child:	
Contact details of parent:	
Parental signature:	