

St. Joseph's Catholic Primary School



Allergy Safety Policy

'Inspired by Christ, working together, achieving our best'

Policy Created: September 2026

Updated: September 2028

Aims of St. Joseph's Catholic Primary School

'Inspired by Christ, working together, achieving our best'

Allergy Safety Policy

Mission Statement

At St Joseph's Catholic Primary School, we believe that every child is uniquely created and loved by God and has the right to feel safe, valued and fully included in all aspects of school life. As a Catholic school, our approach is rooted in dignity, compassion and a commitment to the wellbeing of every member of our community. We recognise that allergies can have a significant impact on a child's health, wellbeing and ability to participate fully in education. We are therefore committed to creating an environment in which pupils with allergies are supported safely and effectively so that they are able to flourish academically, socially, emotionally and spiritually.

This policy sets out how the school will meet its duties under current legislation and statutory guidance relating to allergy safety and medical conditions in schools. It reflects our commitment to safeguarding all pupils and ensuring that pupils with allergies are able to access the same opportunities as their peers while remaining safe from avoidable harm. The school will work closely with parents, carers, healthcare professionals, governors, catering providers and staff to ensure that allergy management is effective, proportionate and responsive to individual need.

Aims

The primary aim of this policy is to establish a whole-school approach to allergy safety that places the health and wellbeing of children at the centre of decision making. The school seeks to minimise the risk of allergic reactions through effective identification, planning, communication, staff training and emergency preparedness. We aim to ensure that all staff understand their responsibilities in supporting pupils with allergies and that pupils themselves develop an age-appropriate understanding of how to manage their condition safely.

We are committed to developing a culture in which children with allergies are included in all aspects of school life and are not disadvantaged by their medical needs. The school recognises that avoiding exclusion is as important as reducing risk and will therefore seek to balance reasonable precautions with opportunities for participation and independence.

Legislative Context

This policy is informed by:

- ✓ The Children and Families Act 2014
- ✓ The Equality Act 2010
- ✓ The Health and Safety at Work Act 1974
- ✓ The SEND Code of Practice
- ✓ The Department for Education's statutory guidance *Supporting Pupils with Medical Conditions at School*
- ✓ The statutory guidance *Allergy Safety in Schools* published in July 2026.

The school will also comply with relevant food safety and allergen information legislation to ensure that pupils are protected throughout the school day.

Identifying and Supporting Pupils with Allergies

The school recognises that the accurate identification of allergies is fundamental to effective risk management. Information regarding allergies will be gathered as part of the admissions process and updated whenever there is a change in a child's medical needs. Parents and carers are expected to provide the school with accurate and up-to-date information regarding diagnoses, prescribed medication and treatment plans.

Where a pupil has a diagnosed allergy that may require support in school, an Individual Healthcare Plan will be developed in partnership with parents and carers and, where appropriate, healthcare professionals. The purpose of the

Individual Healthcare Plan is to ensure that all relevant adults understand the pupil's condition, potential triggers, symptoms, medication requirements and emergency procedures.

The plan will be reviewed at least annually and more frequently where circumstances change or following any significant incident. The school will maintain a central register of pupils with allergies and ensure that relevant information is accessible to staff who have direct responsibility for the child's safety and wellbeing.

Allergy Prevention and Risk Reduction

The school acknowledges that it is not always possible to eliminate allergens entirely from the educational environment. Instead, the school adopts a risk-reduction approach that seeks to minimise the likelihood of exposure while ensuring that pupils remain fully included in school life. Risk assessments will be completed where necessary and reviewed regularly to ensure that appropriate control measures remain effective.

Teachers will carefully consider any curriculum activities that involve food, animals, plants, craft materials or other potential allergens. Alternative materials or activities will be provided where necessary to ensure pupil safety. Staff will also promote good hygiene practices, including regular handwashing and cleaning procedures, in order to reduce the risk of accidental allergen transfer.

The school will work closely with its catering provider to ensure that allergen information is readily available and that dietary requirements arising from allergies are appropriately managed. Particular care will be taken during celebrations, events, fundraising activities and educational visits where food may be shared or consumed. Where necessary, individual risk assessments will be completed to ensure that appropriate arrangements are in place.

Individual Healthcare Plans

St Joseph's Catholic Primary School recognises that Individual Healthcare Plans are central to providing safe and effective support for pupils with allergies. An Individual Healthcare Plan will be developed for pupils whose medical needs require ongoing management during the school day. Plans will be prepared in partnership with parents or carers and, where appropriate, with specialist healthcare professionals to ensure that information is accurate, comprehensive and reflective of current medical advice.

Each Individual Healthcare Plan will clearly identify the pupil's allergy and known triggers, the signs and symptoms of an allergic reaction, medication requirements, emergency procedures and specific risk-reduction measures required within the school environment. Plans will also identify where medication is stored, who has responsibility for administering emergency treatment and what arrangements are necessary to support the pupil in classrooms, dining areas, educational visits and extracurricular activities.

The school is committed to ensuring that Individual Healthcare Plans are practical and accessible documents that support staff in responding confidently and appropriately to medical needs. Plans will be reviewed at least annually, but reviews may take place sooner where there has been a significant allergic reaction, a change in diagnosis, a change in prescribed medication or following updated advice from healthcare professionals. Appropriate members of staff will be made aware of relevant information contained within each plan whilst maintaining the confidentiality and dignity of the pupil concerned.

Educational Visits and Off-Site Activities

St Joseph's Catholic Primary School is committed to ensuring that pupils with allergies have the same opportunities to participate in educational visits, residential experiences, sporting events, enrichment activities and wider curriculum opportunities as their peers. The school recognises that educational visits often present additional risks and therefore require careful planning to ensure that pupils remain safe whilst enjoying a full and rewarding experience.

All educational visits will take account of the medical needs of participating pupils during the planning process. Visit leaders will ensure that relevant allergy information is reviewed in advance and that suitable arrangements are in place to manage risks effectively. Where necessary, individual risk assessments will be completed and shared with relevant staff. Consideration will be given to travel arrangements, accommodation, catering provision, emergency medical access and the availability of medication throughout the visit.

Pupils' prescribed medication, including adrenaline auto-injectors, must accompany them at all times during educational visits and staff supervising the visit must be familiar with the pupil's Individual Healthcare Plan and emergency procedures. Staff involved in visits will know how to recognise the signs of an allergic reaction and understand the action that should be taken if an emergency occurs. The school will work closely with parents and

external providers to ensure that appropriate safeguards are in place whilst promoting independence, confidence and full participation for every child.

Catering Arrangements and Food Safety

The school recognises that food allergies represent one of the most significant risks for many children with allergies. St Joseph's Catholic Primary School is therefore committed to working collaboratively with catering providers, lunchtime staff and families to create a dining environment that is safe, inclusive and responsive to individual needs.

The school and its catering partners will ensure that allergen information is available and that staff involved in food preparation and service understand the importance of accurate allergen management. Information relating to pupils' dietary requirements will be communicated appropriately to relevant staff, and systems will be in place to reduce the risk of accidental exposure to known allergens. The school will ensure that any changes to menus, ingredients or suppliers are carefully considered so that pupils with allergies continue to receive safe meal options.

Special attention will also be given to food provided during celebrations, fundraising events, classroom activities, themed curriculum days and other school functions. Staff will be encouraged to consider non-food alternatives wherever appropriate and will ensure that activities involving food are planned sensitively, taking account of pupils with allergies.

While the school cannot guarantee an allergen-free environment, every reasonable effort will be made to minimise foreseeable risks and to support pupils and families in making informed choices regarding food consumption within school.

Medication Management

The school acknowledges that access to emergency medication can be life-saving for pupils who experience severe allergic reactions. St Joseph's Catholic Primary School will therefore maintain robust procedures for the storage, accessibility, monitoring and administration of allergy medication.

Parents and carers are responsible for providing prescribed medication that is clearly labelled, in date and suitable for their child's needs. The school will maintain accurate records of all medication held on site and will monitor expiry dates regularly to ensure that emergency medication remains effective. Medication will be stored in locations that are secure yet readily accessible in an emergency. Epi-pens will be kept with the pupil in the classroom/playground and a spare in the office. Staff who work directly with pupils who have allergies will be informed of the location of medication and the procedures that should be followed in an emergency situation.

In accordance with current statutory guidance, the school will maintain spare adrenaline auto-injectors for emergency use. These will be stored appropriately, checked routinely and made available where there is a reasonable belief that a pupil is experiencing anaphylaxis. Staff will receive training in recognising anaphylaxis and administering adrenaline, and records will be maintained of all medication administered within school.

Following the administration of any emergency medication, emergency services will be contacted immediately and parents or carers informed as soon as possible. All incidents will be recorded and reviewed to identify whether any further actions are necessary to strengthen the school's approach to allergy safety. Through effective medication management, the school seeks to provide reassurance to pupils, families and staff whilst ensuring that life-saving treatment can be delivered without delay when required.

Staff Awareness and Training

The school recognises that effective allergy management depends upon staff understanding and confidence. For this reason, all members of staff will receive allergy awareness training appropriate to their role. Training will include information about common allergic conditions, the recognition of allergic reactions, the signs and symptoms of anaphylaxis and the appropriate use of adrenaline auto-injectors.

Training will form part of the induction process for new staff and will be refreshed regularly to ensure knowledge remains current. Records of all training undertaken will be maintained by the school. Additional training will be provided where individual pupils have specific needs that require a greater level of awareness or expertise.

Staff should never feel unsupported when responding to a medical emergency and the school will ensure that appropriate guidance is always available.

Emergency Response and Anaphylaxis

The school understands that anaphylaxis is a medical emergency requiring immediate treatment. Any member of staff who suspects a pupil is experiencing anaphylaxis must act without delay. In such circumstances, adrenaline should be administered as soon as possible in accordance with the pupil's healthcare plan and staff training. Emergency services will be contacted immediately and parents or carers informed as soon as practicable.

The school will hold spare adrenaline auto-injectors for emergency use in accordance with statutory guidance and will ensure that staff know where these are stored and how they may be accessed in an emergency.

Following any allergic reaction, the school will review procedures and risk assessments to determine whether improvements can be made to further protect pupils in the future.

Inclusion, Wellbeing and Pupil Voice

At St Joseph's Catholic Primary School, we are committed to ensuring that pupils with allergies are not excluded from learning opportunities, educational visits, extra-curricular activities or social experiences. We recognise that living with an allergy can sometimes create anxiety for children and their families. The school therefore seeks to foster an atmosphere of understanding, care and inclusion in which pupils feel confident to speak about their needs and seek help when required.

Children will be encouraged, where appropriate to their age and level of understanding, to take an active role in managing their allergies and understanding how to keep themselves safe. Staff will promote awareness among pupils in a manner that is sensitive, respectful and age appropriate.

Any behaviour that mocks, intimidates or excludes a child because of an allergy or medical condition will be treated as a serious matter and addressed through the school's Behaviour and Relationships Policy. This reflects our Catholic commitment to respect, kindness and the dignity of every individual.

Risk Assessment and Risk Management

St Joseph's Catholic Primary School recognises that effective risk assessment is essential in ensuring the safety and inclusion of pupils with allergies. The school takes a proactive approach to identifying and reducing the risk of exposure to known allergens whilst enabling pupils to participate fully in all aspects of school life. Risk assessments are informed by medical advice, Individual Healthcare Plans and discussions with parents and, where appropriate, healthcare professionals.

Risk assessments will consider activities such as classroom learning, practical activities, lunchtimes, educational visits, clubs and special events where allergens may be present. Where risks are identified, appropriate control measures will be implemented to reduce the likelihood of exposure and ensure that staff understand how to respond in an emergency.

Additional individual risk assessments may be completed for pupils with severe allergies or a history of anaphylaxis. These assessments will identify hazards, outline the controls required and clarify staff responsibilities. Educational visits will always include consideration of allergy-related risks, with arrangements made for medication, emergency procedures and communication with external providers.

Risk assessments will be reviewed annually, following an allergic reaction or near miss, when medical advice changes, or whenever a change in circumstances creates new risks. The school will use incident reviews to improve practice and strengthen allergy safety procedures.

Governance Responsibilities

The Governing Body of St Joseph's Catholic Primary School recognises its statutory responsibility to make appropriate arrangements for supporting pupils with medical conditions, including those with allergies and those at risk of anaphylaxis. Governors are committed to ensuring that the school complies fully with current legislation and statutory guidance and that effective systems are in place to safeguard pupils whilst promoting inclusion and equality of access.

The Governing Body will ensure that this Allergy Safety Policy is reviewed annually and whenever significant changes in legislation, guidance or local circumstances occur. Governors will monitor the implementation of the policy through reports from school leaders and will seek assurance that pupils with allergies are identified appropriately, supported effectively and enabled to participate fully in all aspects of school life.

The Governing Body will ensure that sufficient resources are allocated for training, emergency medication, risk management and health care planning. Governors will also ensure that lessons learned from incidents and near misses are considered when reviewing school procedures and that allergy safety forms part of the school's wider safeguarding and health and safety arrangements. The school recognises that governors have an important role in promoting a culture where allergy safety is regarded as everyone's responsibility and where the wellbeing and dignity of all pupils is prioritised.

Monitoring, Review and Continuous Improvement

The school is committed to maintaining the highest standards of allergy safety and will continually evaluate the effectiveness of its procedures. All allergy-related incidents, including near misses, will be recorded and reviewed to identify any lessons that can be learned. Where appropriate, findings will inform revisions to risk assessments, staff training and operational procedures.

This policy will be reviewed annually by the governing body or sooner if there are significant changes to legislation, statutory guidance or school practice. Through regular monitoring and partnership working, St Joseph's Catholic Primary School aims to provide a safe, inclusive and nurturing environment in which all pupils, including those with allergies, can thrive.

Appendices

1. Allergy care plan without EPI PEN
2. Allergy care plan with EPI PEN
3. Whole School Allergy Risk Assessment

This child has the following allergies:

Name:

DOB:

Photo

Mild/moderate reaction:

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

Action to take:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine:
..... (If vomited, can repeat dose)
- Phone parent/emergency contact

Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

- | | | |
|---|--|---|
| A AIRWAY | B BREATHING | C CONSCIOUSNESS |
| <ul style="list-style-type: none"> • Persistent cough • Hoarse voice • Difficulty swallowing • Swollen tongue | <ul style="list-style-type: none"> • Difficult or noisy breathing • Wheeze or persistent cough | <ul style="list-style-type: none"> • Persistent dizziness • Pale or floppy • Suddenly sleepy • Collapse/unconscious |

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie child flat with legs raised** (if breathing is difficult, allow child to sit)

- 2 Immediately dial 999** for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")
- 3 In a school with "spare" back-up adrenaline autoinjectors, ADMINISTER the SPARE AUTOINJECTOR** if available
- 4 Commence CPR** if there are no signs of life
- 5 Stay with child** until ambulance arrives, **do NOT** stand child up
- 6 Phone parent/emergency contact**

***** IF IN DOUBT, GIVE ADRENALINE *****

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis. For more information about managing anaphylaxis in schools and "spare" back-up adrenaline autoinjectors, visit: sparepensinschools.uk

Emergency contact details:

1) Name:



2) Name:



Additional instructions:

If necessary, DIAL 999 and GIVE ADRENALINE using a "back-up" adrenaline autoinjector if available. Administer adrenaline reliever (blue puff) via spacer.

Parental consent: I hereby authorise school staff to administer the medicines listed on this plan, including a "spare" back-up adrenaline autoinjector (AAI) if available, in accordance with Department of Health Guidance on the use of AAI in schools.

Signed

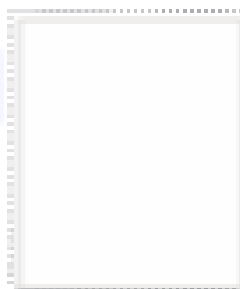
This BSACI Action Plan for Allergic Reactions is for children and young people with mild food allergies, who need to avoid certain allergens. For children at risk of anaphylaxis and who have been prescribed an adrenaline autoinjector device, there are BSACI Action Plans which include instructions for adrenaline autoinjectors. These can be downloaded at bsaci.org

For further information, consult NICE Clinical Guidance CG116 Food allergy in children and young people at guidance.nice.org.uk/CG116

This child/young person has the following allergies:

Name:

DOB:



Mild/moderate reaction:

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

Action to take:

- Stay with person, call for help if needed
- Locate adrenaline autoinjector(s)
- Give antihistamine:
Loratadine 5mg
(if worried, can repeat dose)
- Phone parent/emergency contact
- Do not take a shower to help with itchy skin, this can worsen the reaction.

Watch for signs of ANAPHYLAXIS

(a potentially life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN DIFFICULTY IN BREATHING**

A AIRWAY

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen tongue

B BREATHING

- Difficult or noisy breathing
- Wheeze or persistent cough

C CONSCIOUSNESS

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie flat with legs raised (if breathing is difficult, allow person to sit)



- 2 Use Adrenaline autoinjector without delay (e.g. EpiPen®) (Dose: mg)

- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-RL-AX-S")

*** IF IN DOUBT, GIVE ADRENALINE ***

AFTER GIVING ADRENALINE:

1. Stay with child/young person until ambulance arrives, **do NOT** stand them up. Keep them lying down, even if things seem to be getting better.
2. Phone parent/emergency contact. If you are on your own, call a friend or relative and ask them to come over.
3. If no improvement **after 5 minutes**, give a further adrenaline dose using a second autoinjector device, if available.

Commence CPR if there are no signs of life

You can dial 999 from any phone, even if there is no credit left or a mobile. Medical observation in hospital is recommended after anaphylaxis.

Emergency contact details:

1) Name:



2) Name:



Parental consent: I hereby authorise school staff to administer the medicines listed on this plan, in accordance with Department of Health Guidance on the use of AAs in schools.

Signed:

Print

Name:

Date:

Consent is required for children under 16 years (and for young people over 16 unable to give consent themselves) except in an unforeseen emergency

For more information about managing anaphylaxis in schools and "spare" adrenaline autoinjectors, visit: sparegelschools.co.uk

How to give EpiPen®



1 PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: "blue to sky, orange to the thigh"



2 Hold leg still and PLACE ORANGE END against mid-outer thigh "with or without clothing"



3 PUSH DOWN HARD until a click is heard or felt and hold in place for 3 seconds. Remove EpiPen.

Additional instructions:

If wheezy due to an allergic reaction, GIVE ADRENALINE FIRST and then asthma reliever (e.g. blue puffer) via spacer, if prescribed

This is a medical document to be completed by a healthcare professional. It must not be altered without their permission. This document provides medical authorisation for schools to administer a "spare" back-up adrenaline autoinjector if needed, as permitted by the Human Medicines (Amendment) Regulations 2017. During travel, adrenaline auto-injector devices must be carried in hand-luggage or on the person, and NOT in the luggage hold. This action plan and medical authorisation to carry emergency autoinjectors has been prepared by:

Sign & print name:

Hospital/Clinic:



Date:

Whole School Allergy Management Risk Assessment

T

What are the hazards for each activity?	What are you already doing to control the risks?	Probability	Impact
Medication:			
<u>Storage:</u> Location of each student's medication Location of generic 'spare' AAI Consider: • is there consistency of container throughout the school to make it easily identifiable? • Is the student able to self carry their own medication? • Is the back up medication always within 5 mins of where the students are? Are multiple sites needed for back up medication? • Is the students and back up medication always accessible regardless of the time of day?			
Training:			
Check that the course has medical input/review Training should be updated annually Ideally all staff would be trained. If this is decided against, a rationale based on risk assessment should be produced. Consider: Will there always be a member of staff available to administer an AAI throughout the school day who is not further than 5 minutes away from the student at any given point. Course must include: • Signs and symptoms of allergy & anaphylaxis • Emergency response • Administration of adrenaline auto-injectors • Prevention of reactions			

Ideally would include: • Types of allergen: food and non-food • Curriculum • Trips & visits including sports • Reporting and recording AllergyWise® for Schools is a low cost, CPD certified course that is clinically reviewed and assured to be up to date.			
Food and drink: <u>Catering:</u> • What systems are in place to ensure that the student eats safely? Do all the catering and lunchtime staff know who has allergies and how to ensure that they are safe. Do they know how to report near misses and what to do should a reaction occur? • What measures do you have in place for liaison with the catering contractor and lunchtime supervisory staff? • Ensure up to date allergen information is available for each menu and that it is easily accessible, ideally on school website. • Make sure that any unexpected changes to the menu and allergens are communicated urgently to student/parent/guardian so that a different choice can be made. • Ensure that allergen matrix is available and kept up to date. The FSA have a free to download one: https://www.fooddocs.com/food-safety-templates/food-allergen-chart Consider: - wrap round care - break times - lunch times			

<u>Events involving food:</u> - Cake sales - Parties - Other PTA events - Drinks • How can these be made inclusive? • What are the risks if the allergens are present during the events? Is handwashing possible? • What information has to be shared ahead of the event to remind all about the exclusion of an allergen if this has been agreed. Allergen Matrix can be found here: https://www.fooddocs.com/food-safety-templates/food-allergen-chart • Are allergens displayed, where appropriate to the event?			
<u>Celebrations:</u> • Consider discouraging cake and sweets for children as treats both for birthdays and school celebrations. • Where food is used, consider the impact for the students with allergies and discuss with parent/carer/student at the earliest opportunity to plan for a safe and inclusive event.			
Curriculum activities:			
<u>Cooking:</u> • Adapt recipes for all to create a safe cooking space. If a recipe cannot be adapted, can a different recipe be used? • Has the allergic student got their own set of cooking materials? • Are allergies included in the food technology curriculum so that all students have			

awareness of the impact of allergies to the health of the allergic person. • Are all students made aware of the impact of their actions on an allergic person should the specific allergens not be excluded? • Are all students taught about cross contamination and the impact of this?			
<u>Creative activities: e.g. junk modelling, pasta</u> • When using packaging ensure that the allergens have not been in those packets; for example: crunchy nut cornflakes should not be in a classroom where a student has a peanut allergy. When students are bringing in materials from home, ensure that communication is sent to parent/carers to specify what they are unable to bring in and monitor this when the packaging comes into school. • Plastic containers should be washed in hot soapy water to remove allergens.			
<u>Music: instrument sharing (cross contamination issue)</u> • Do instruments have to be shared? • Do blowing percussion instruments have to be shared? How can they be sterilised if they do? Can the allergic student have their own blowing instrument that they don't need to share?			
<u>Science activities:</u> • Review the science curriculum and see where allergens are used. Consider whether these have to be used and whether there are alternates that can be used? If essential, the activity needs to be individually risk assessed for the allergic student. How can that lesson be made inclusive and safe?			

Consider the impact of cross contamination and whether this could cause a reaction for the allergic student.			
<u>PE:</u> Consider: Indoor Outdoor Forest Schools - Where emergency medication is kept during PE and how quickly it can be accessed. If it is left in the classroom/changing room and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? - Is there an allergy trained member of staff present during after school clubs? - Is there an allergy trained member of staff accompanying away sporting events?			
<u>Break time:</u> Consider: Playground Field - Where emergency medication is kept during breaktimes and how quickly it can be accessed. If it is left in the classroom and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? - Is there an allergy trained member of staff present during break times?			
School animals:			
Consider:			

Therapy dogs and the access they have to children with allergies. Is there an allergen free area that the student will be safe in? We have Dogs in School guidance that will assist with this section.			
Visitors & supply staff:			
Consider: • Has the visitor been made aware of the school's policy? • If there is an allergy free zone that has been created due to a student's individual risk assessment, how has this been communicated to the visitor/supply staff? • Does the visitor need to know about the student's allergy? Will they be using the student's allergen? Do they need to know they have to have eliminated cross contamination from themselves through handwashing after eating?			
Offsite activities:			
<u>Day trips:</u> Consider: • Is there a specific allergy section on the visit/experience risk assessment? • Is there an allergy trained member of staff accompanying the visit? • Storage of AAI's • Availability of emergency services and nearest hospital • Is there a good phone signal? If not, how will communication work? How will emergency services be called? • Is food being taken or served? It may be necessary to request that other students do			

not bring specific allergens on the trip to reduce risk during the day. Communication with venues and parent/carers to set out expectations. - Are any of the activities during the day high risk to the allergic student; inform venues and agree control measures, aim for inclusivity. <u>Residential visits including D of E:</u> Consider: - Storage of AAIs for each activity being undertaken & overnight - Availability of emergency services and nearest hospital - Is there a good phone signal? If not, how will communication work? How will emergency services be called? - What food is being served? Consider cross contamination. Do any menu changes need to be made to ensure safety? Will the allergic person have sufficient to eat? Does any food need to be taken? - Can students eat food in rooms? - Is there a specific allergy section on the visit/experience risk assessment? - Is there an allergy trained member of staff accompanying the visit? - Do other students need to understand signs, symptoms of allergy, how to call for help and administer an AAI?			
Other:			

This must be completed for any activity that is medium with the aim of bringing the risk to LOW.

Activities that are High or Extreme must **not happen** unless action can be implemented to bring the risk to LOW.

Hazard	What further action do you need to take to control the risks?	Who needs to carry out the action?	What is the action needed by?	Completed

Consequence		Minor	Moderate	Major	Critical	Catastrophic
Likelihood	Rare	Low	Low	Low	Low	Low
	Unlikely	Low	Low	Medium	Medium	Medium
	Possible	Low	Medium	Medium	High	High
	Likely	Medium	Medium	High	High	Extreme
	Certain	Medium	Medium	High	Extreme	Extreme

Consequence	Minor	Moderate	Major	Critical	Catastrophic
This is the impact of the action being allowed to happen	No reaction	Non anaphylactic reaction	Emergency response required, ambulance and hospital	Emergency response required, ambulance and hospital	Fatal, Death

Likelihood	Definition
Rare	May only occur in exceptional circumstances
Unlikely	Could occur in some circumstances, surprised if happened
Possible	Possible or likely to occur in most circumstances
Likely	Will occur in most circumstances
certain	It is expected to occur, inevitable