Bangabandhu Primary School
Allergy Safety Policy

Our Values
Everyone Belongs
Everyone Achieves
Everyone Thrives

The Bangabandhu Way
Be Respectful
Be Responsible
Be Ready to Learn

Our values are supported by Our Golden Rights Articles from the United Nations Convention on the Rights of a Child.
Our Golden Rights are for all adults and children in our school. Adults in our school respect children's rights and always act in their best interests (Article 3)

Our Golden Rights
Article 2: We respect the right to be treated fairly and are always honest.
Article 19: We respect the right to feel safe in body and mind.
Article 12: We respect everyone's right to be heard and listened to.
Article 15: We respect everyone's right to join in.
Article 24 and 29: We respect the right to be in a safe, clean environment.
Article 28: We respect the right to learn and let others enjoy learning.

Date policy was completed:1/9/26

Review date:1/9/27

Person(s) responsible for implementing Asthma and Allergy Friendly Schools: Katie Mik and Lynn Howell

This document is written in line with the statutory guidance, the Section 34 of the Children's Wellbeing and Schools Act 2026 requiring that LA maintained schools, academies and PRUs must have an allergy safety policy. It is also used in conjunction with our Medical Needs Policy Sept 26.

A named member of the senior leadership team, Deputy Head Katie Mik, has responsibility for allergy safety, including driving the implementation of the allergy safety policy and contributing to or leading review of the policy.

The allergy safety policy is reviewed at least annually. It can be reviewed more frequently, particularly where incidents or "near misses" suggest areas for improvement. Any review should take account of any incidents and "near misses" and should seek to learn lessons from them. This is essential where incidents suggest that policies or procedures may leave individuals with allergy at risk.

Governing bodies should ensure that allergy safety policies are readily accessible to parents and staff. The policy is published on the school, college or setting's website and be made available in hard copy on request.

Culture

Awareness training

Staff will be trained in allergy awareness and emergency response, at least annually, following this policy Asthma and Allergy friendly school Policy.

All staff present during times when pupils are scheduled to be on site receive allergy awareness training. This includes permanent staff, temporary staff, supply teachers, agency workers and regular volunteers. It includes catering staff and others who may oversee children and young people at breakfast or after school clubs. It is not intended to include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

Induction arrangements for new staff, include allergy awareness training.

Our allergy awareness training ensures all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it;
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist;
- Understand the difference between food allergy, coeliac disease and food intolerance;
- Know where to find information on allergy triggers;
- Can identify the range of symptoms of allergic reactions;
- Understand and can recognise anaphylaxis;
- Know how to respond in an emergency, including:
    - calling emergency services and informing parents;
    - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
    - training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);
- Understand the impact allergy can have on a child or young person's wellbeing;
- Understand our allergy safety policy;

• Know how to check whether an individual is on the record of those with known allergy and how to use an Allergy or Asthma Action Plan;
• Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens;
• Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a “near miss”).
Training under this guidance is understood as allergy awareness and emergency response training. It is not read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

Wellbeing

The governors and staff at Bangabandhu Primary School are committed to the inclusion of all pupils and wish to ensure that pupils with medical needs receive proper care and support at school.
Bangabandhu welcomes children who have medical conditions and endeavours to provide them with the same opportunities as all others at school (both school-based and out of school activities).
We will help to ensure that children with medical needs can:
Be healthy
Stay safe
Enjoy and achieve
Make a positive contribution
Achieve economic wellbeing once they left school

The school recognises that some complex and/or long-term health needs may be considered as a disability under the equality legislation. All staff at Bangabandhu will ensure that children with medical needs and/or disabilities be given equal opportunities, and that any incidents of discrimination or bullying are dealt with by the headteacher or a member of the leadership team. A record will be kept of such incidents. All opportunities will be taken to enhance understanding and to foster more positive relationships. Equality of opportunity will always be promoted, and reasonable adjustments will be made to ensure optimum access and participation of children with disabling medical conditions alongside their peers.

Minimising risk

We minimise the risk of individuals (whether children, young people, staff or visitors) coming into contact with their known allergens. This includes:
• Measures to manage the risks of exposure to a food allergen through food provided by the school. Children wear allergy lanyards and all lunchtime staff know to check these. Each class has a medical needs and safeguarding board and on that is a booklet containing photos and information of all children who have dietary and medical needs
• Measures to manage the risks of exposure to a food allergen through food brought in by others (for example parents, children and young people or staff). We are a nut free school. When there is a party, staff follow the medical needs, allergies and dietary requirements of the pupils.

• Where children and young people have known allergy to airborne or contact allergens, we will put reasonable measures in place to manage the risk of the child or young person being exposed to such allergens.
• An expectation that staff planning any activity should consider the risk of exposure to allergens, for example in craft, science, musical or cooking activities, or where activities involve animals.
• Specific risk assessments to manage the risks of exposure to allergens in individuals with an allergy when planning external visits or trips.

Food allergy

The catering staff provide clear information on allergens in food provided. Catering staff check children's lanyards and only give them food they are able to eat. Special meals are cooked if needed. Where food in provided in classes such as Early Years or specialist classes it follows the medical needs, allergies and dietary requirements of the pupils.

Individual children and young people

Identification

The school gathers information about children's health, medical needs, and conditions, as part of its admission procedures. Parents are requested to, and should provide, all necessary information to ensure the school can provide children with the best possible care. A medical needs section in the admission form is completed as part of the overall admission procedure. All information is discussed with parents and consent gained to share.

All children with allergies and medical needs are recorded in the Children with Dietary, Health and Medical needs document, which is updated regularly as needed. Each class has a medical needs and safeguarding board and on that is a booklet containing photos and information of all children who have dietary and medical needs. Staff are expected to read and follow Individual Healthcare Plans (IHPs) and emergency medical procedures for pupils in their care, these are kept in the office with copies in each classes' medical needs box. Medicaltracker is used.

Members of staff with allergies are recorded on their profile on Arbor and shared with all staff as required.

Individual Healthcare Plans

Children and young people should have an Individual Healthcare Plan (IHP) if:
• they have an allergy which has a functional impact on them in their school, college or setting;
• they are at risk of harm as a result of their allergy and
• they require arrangements which are additional to or different from those made generally.

The IHP sets out the additional and/or different arrangements that will be in place for supporting the child or young person with their medical condition or allergy, including in emergency situations. Children and young people with allergy who require specific support arrangements will have them documented through an Individual Healthcare Plan.

This includes children and young people whose allergies require flexibility and "reasonable adjustments", as well as those who require medication (either proactively or in an emergency situation).
Where children and young people have an Allergy Action Plan and/or Asthma Action Plan issued by a healthcare professional, the IHP refers to or is attached it. Whenever an updated Action Plan becomes available, the child or young person's Individual Healthcare Plan is reviewed to incorporate it

Prescribed adrenaline

Children and young people who are prescribed adrenaline devices have rapid access to their devices at all times, noting that in a case of anaphylaxis, adrenaline should be administered within five minutes. This includes in the lunch area, playground and sports fields or when on visits or trips. The AAI devices are stored in each class medication box which is taken out during fire alarms and on trips. They are stored near the main hall so are accessible for lunch and PE.
Arrangements are made with parents to have additional devices so the children's can remain in school for children, rather than young people and parents to take individually prescribed adrenaline devices home (for example at the end of the day for the journey home). A rigorous system of checking termly that all medication remains in date is set up.
• All children with prescribed adrenaline devices (and an Allergy Action Plan) are recorded in the Children with Dietary, Health and Medical needs document, which is updated regularly as needed. Each class has a medical needs and safeguarding board and on that is a booklet containing photos and information of all children who have prescribed adrenaline devices.

School-wide policies

"Spare" adrenaline devices

The "spare" adrenaline devices are used if children don't have access to their medication and parents have given consent or in an emergency medical services (e.g. 999) or another suitably qualified person, may advise to use the emergency autoinjector pen.

The "spare" adrenaline devices are located in the main office on the door. The "spare" adrenaline devices will be stored safely at room temperature (in line with manufacturer guidance), protected from direct sunlight and extremes of temperature.
The "spare" adrenaline devices and salbutamol inhalers will be checked every half term to confirm that they are in date and in working order, following the medical checklist procedure. The office staff check and order replacement "spare" adrenaline devices when they are used or go out of date and safe disposal of adrenaline autoinjectors (as they contain a needle) occurs by taking them to a local pharmacy.

We ensure that no child or young person is more than five minutes from adrenaline devices.
When storing "spare" adrenaline devices:
• "Spare" adrenaline devices are readily accessible and not locked away;
• In the event of an anaphylaxis, adrenaline should be administered as soon as possible. In practice, this should be no more than five minutes, i.e. adrenaline devices must be able to be brought to the person having anaphylaxis within 5

minutes.
• “Spare” adrenaline devices are stored in pairs, so that if a second one is necessary it is on hand rather than needing to be obtained from elsewhere on site;
• “Spare” adrenaline devices are clearly labelled, to avoid any confusion with adrenaline devices prescribed to a named person.

Visits and trips

The school has an educational visit policy requiring all staff to carry out pre visits and complete a trip risk assessment setting out what arrangements and adjustments will be put in place to ensure children and young people with allergy are able to participate and do so safely (including access to adrenaline where required.

Risk assessments will be conducted for any child or young person at risk of anaphylaxis taking part in a trip off the premises. Children and young people at risk of anaphylaxis have their own adrenaline device with them, and there will be staff trained to administer adrenaline in an emergency.

Serious incidents and “near misses”

Every serious incident or “near miss” involving allergy safety will be recorded, reported and reviewed with actions put in place if needed.

In some cases, the impact of exposure to an allergen while in an education setting may not be recognised the child or young person is back at home. It is therefore important that the child or young person, their parents or others (for example healthcare professionals) can report that there has been an incident.

Information sharing

When sharing information about children and young people with allergy we follow our data protection policy.

A child or young person’s health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Schools have a lawful basis to hold, use and share a child’s special category health data when this is necessary, but it should always be done in a controlled and respectful way, because unnecessary sharing can reduce children’s confidence in practitioners and can be embarrassing for children and young people who may not want to be singled out. Children's information is in a booklet rather individual photos being displayed on the medical needs and safeguarding board.

Awareness of the allergy safety policy

The allergy safety policy is published on the school website. All staff are aware of and understand the policy, as part of annual allergy awareness training.