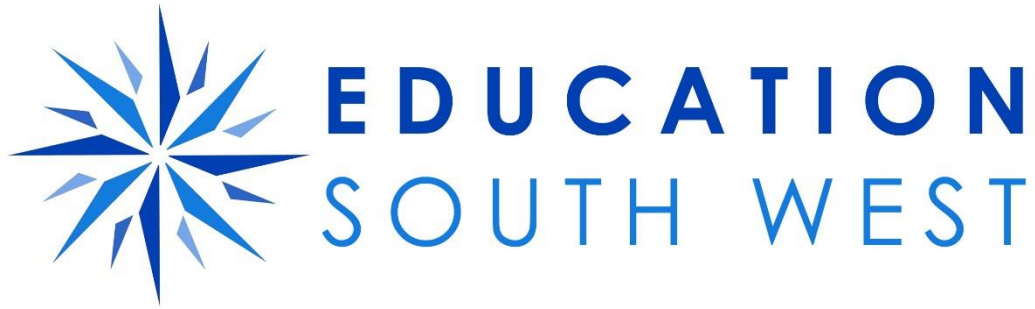




ESW Allergy Safety Policy

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Version	1.04
Author Initials	SW (ZW)/BB
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1. Policy Statement

- 1.1 Education South West (ESW) is committed to providing a safe, inclusive environment for pupils, staff, and visitors with allergies.

This policy establishes the Trust-wide framework for:

- Managing allergies safely;
- Preventing exposure to allergens where reasonably practicable;
- Responding effectively to allergic reactions, including anaphylaxis.

2. Legal Duties

- 2.1. ESW will ensure compliance with:

- The Schools (Allergy Safety) legislation ("Benedict's Law");
- Department for Education statutory guidance.

- 2.2 The Trust will ensure it has in place:

- A standalone Allergy Safety Policy;
- Appropriate staff training;
- Availability of emergency medication (including spare Adrenaline Auto Injectors (AAIs));
- Individual care planning for pupils with serious allergies.

3. Scope

- 3.1 This policy applies to:

- All ESW schools and settings;
- All staff, pupils, and visitors;
- All school activities, including off-site visits and extended provision.

4. Core Principles

- 4.1 ESW operates under the following principles:

- **Every allergy is treated seriously;**
- **Every child matters;**
- **Safety and inclusion take priority over existing practice.**

- 4.2 The Trust adopts a whole-school approach to prevent allergen exposure wherever reasonably practicable and to ensure safe and effective emergency response.

5. Equality and Inclusion

- 5.1 The Trust will ensure that pupils with allergies:

- Are not disadvantaged in accessing education;
- Are supported to participate fully in all aspects of school life;
- Are treated with dignity and respect.

6. Roles and Accountability

6.1 The Trust requires:

- Each school to appoint a **Designated Allergy Lead**;
- Clear responsibilities for staff and parent/carers;
- Effective communication and record-keeping.

6.2 Refer to Appendix 1 - Roles and responsibilities

7. Individual Healthcare Planning

7.1 The Trust requires that:

- All pupils with diagnosed allergies have an **Individual Healthcare Plan (IHP)**;
- All pupils at risk of anaphylaxis have an **Allergy Action Plan (AAP)**;
- Plans are created with parents and healthcare professionals;
- Plans are regularly reviewed and updated.

7.2 Each IHP must include:

- Emergency contact details;
- Photograph;
- Allergens and triggers;
- Medication details;
- Consent for emergency treatment;
- Linked Allergy Action Plan (and Asthma Plan if relevant).

7.3 Where a pupil requires an Allergy Action Plan, this must be created by a healthcare professional, stored with a pupil's medication, provide clear emergency instructions and must be accessible to all relevant staff.

8. Emergency Preparedness

8.1 All schools must:

- Maintain clear and effective emergency response arrangements;
- Ensure staff are trained to recognise and respond to anaphylaxis;
- Maintain appropriate emergency medication supplies.

8.2 Please refer to Appendix 2 for the Trust Emergency Response Procedure.

8.3 All incidents where there has been an allergic reaction, or suspected allergic reaction, are recorded and if necessary, a pupil's IHP is updated. Parents/carers are always informed of an incident, and it is their responsibility to inform the relevant healthcare professional and provide any updates to a pupil's AAP.

8.4 In life-threatening situations, staff are expected to act to save life and are protected when acting in good faith.

9. Medication

9.1 The Trust requires:

- Safe, accessible, and clearly labelled medication;
- Availability of spare Adrenaline Auto Injectors (AAIs) in all settings;
- Systems for monitoring expiry and condition of medication.

9.2 Refer to appendix 3 for medication management procedures.

10. Training

10.1 The Trust will ensure:

- Annual mandatory allergy and anaphylaxis training for all staff;
- Additional role-specific training where required;
- Robust induction arrangements for new staff.

10.2 The training will cover allergen identification and allergy awareness, early recognition of anaphylaxis signs, and emergency procedures. The training will ensure staff can:

- Recognise allergic reactions and anaphylaxis;
- Administer AAIs;
- Respond appropriately in emergencies;
- Reduce risk in daily practice.

11. Risk Reduction and Food Safety

11.1 The Trust is committed to:

- Minimising exposure to allergens;
- Safe food preparation and allergen management;
- Clear identification of pupils with known allergies;
- Balancing safety with inclusion.

11.2 All schools will implement risk reduction measures where applicable which may include:

- Implementing no food sharing where required;
- Avoiding allergenic materials in curriculum activities and consider hidden allergen risks (e.g. play dough, glue, packaging).

12. Off-Site Visits and Extended Provision

12.1 All educational visits, sports activities, and extended provision must:

- Include allergy management in risk assessments;
- Ensure medication accompanies pupils;
- Ensure access to IHPs and Allergy Action Plans;

- Liaise with parents for overnight visits;
- Inform venues where necessary;
- Ensure staff are trained and prepared;
- Support full participation for pupils with allergies.

13. Contractors

- 13.1 The Trust recognises that contractors and other external service providers may be present on site during the school day and must therefore contribute to the safe management of pupils with allergies.

All contractors working on school premises are required to comply with the school's Allergy Policy and any relevant health and safety procedures. Prior to commencing work, contractors must inform the school of any activities, materials, products they intend to bring onto site that may pose an allergy risk.

Where work involves the use of substances that could trigger an allergic reaction, appropriate control measures will be agreed with the school in advance.

Contractors must not provide food, drinks or consumables to pupils unless specifically authorised by the school and must follow instructions regarding allergen-free areas and emergency procedures if contracted to do so.

The school reserves the right to restrict or prohibit the use of certain products or materials where these present an unacceptable risk to pupils, staff or visitors with known allergies.

13. Monitoring and Review

- 13.1 This policy will be reviewed annually to ensure:
- Ongoing legal compliance;
 - Alignment with best practice;
 - Continuous improvement.

APPENDIX 1 ROLES AND RESPONSIBILITIES

Designated Allergy Leads

Must:

- Maintain the school allergy register
- Coordinate IHPs and AAPs
- Manage emergency medication stock
- Monitor compliance within the school

SCHOOL	ALLERGY LEAD
Blackawton Primary School	Vicky Llewellyn / Jude Muir
Christow Primary School	Sharon Fleming
Coombeshead Academy	Jo Chappell
Dartmouth Academy	Sam Littlejohns
East Allington Primary School	Liam Fielding / Maggie Baillie
King Edward VI Community College	Kelly Dalton
Kingsbridge Community College	Fiona Lee
Kingsbridge Primary School	Polly Gallagher
Kingsteignton Primary School	Kirsty Prentice
Rydon Primary School	Rachel O'Sullivan / Claire Bingham
South Devon UTC	Liz Durrant
Stoke Fleming Primary School	Chris Harrison
Teign School	Phil Spicer
Wynstream Primary School	Ben Westley / Emma-Leigh Partridge

Parents / Carers

Must:

- Provide full details of allergies on admission
- Supply up-to-date Allergy Action Plans
- Provide in-date medication
- Inform school of any changes

Staff

Must:

- Complete mandatory training annually
- Be aware of pupils with allergies
- Supervise food-related activities carefully
- Carry medication on trips
- Record and report incidents
- Follow emergency procedures without delay

ALLERGY EMERGENCY PROCEDURE

In suspected anaphylaxis:

CHECK



1. Look for signs of an allergic reaction or anaphylaxis
2. Stay with the pupil/person and call for help
3. Position appropriately (lying flat unless breathing difficulty)

INJECT



4. Administer the adrenaline auto-injector (AAI) immediately
5. Use spare AAI if needed
6. Note the time

CALL



7. Call 999 and say "ANAPHYLAXIS"
8. Follow ambulance instructions
9. Contact parents/carers once emergency services are on the way

APPENDIX 3 MEDICATION MANAGEMENT

Pupil Allergy Medication & Storage

Medication should be stored in a suitable container and clearly labelled with the pupil's name. It should be accessible within 5 minutes and never be locked away.

The pupil's medication storage container should contain:

- Two AAls i.e. EpiPen® or Jext®;
- An up-to-date allergy action plan;
- Antihistamine as tablets or syrup (if included on allergy action plan);
- Spoon if required;
- Asthma inhaler (if included on allergy action plan);
- Clearly labelled.

Spare Adrenaline Auto-Injectors (AAls) & Storage

Each ESW school will stock unassigned spare AAls for emergency use in children who are at risk of anaphylaxis, if a pupil's personal pen fails, is unavailable, or if a first-time reaction occurs. The spare pens should be:

- Clearly labelled;
- Not locked away, accessible and known to all staff;
- Checked regularly for expiry and condition;
- Available for emergency use where needed.

Monitoring

Termly checks of expiry dates on all AAls is untaken and parents notified of replacements when needed.

Disposal

AAls should be stored at room temperature, protected from direct sunlight and temperature extremes. AAls are single use only and must be disposed of as sharps. Used AAls can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin.