



# BREDON

## SCHOOL

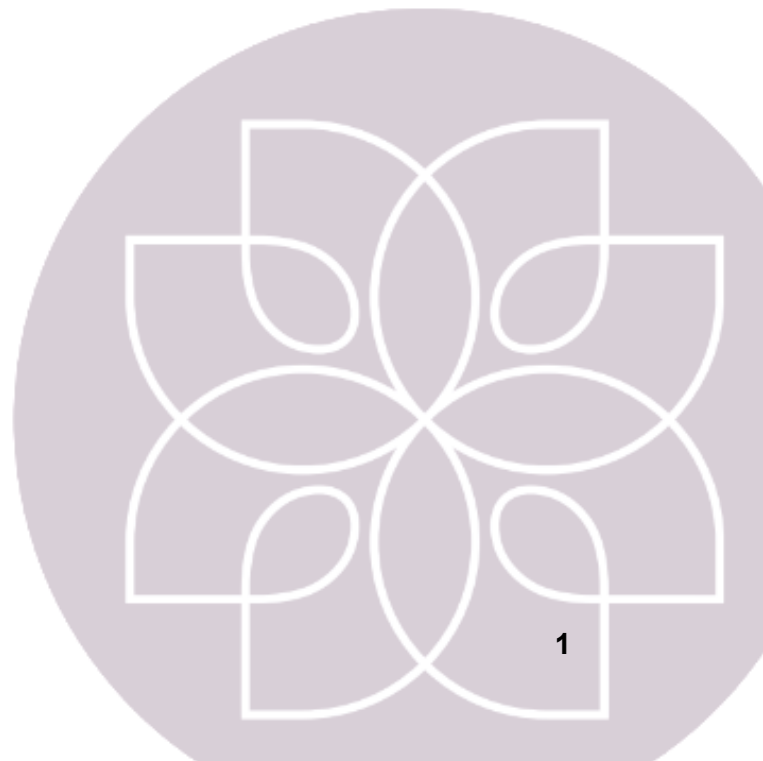
### **Allergy Management Policy**

**Reviewing Member of Staff:** School Nurse

**Date updated:** December 2025

**Review Date:** December 2026

**Review Cycle:** Annually



Bredon School is owned and operated by Cavendish Education.

This policy is one of a series of school policies that, taken together, are designed to form a comprehensive statement of the school's aspiration to provide an outstanding education for each of its students and of the mechanisms and procedures in place to achieve this. Accordingly, this policy should be read alongside these policies. In particular, it should be read in conjunction with the policies covering equality and diversity, Health and Safety, safeguarding and child protection.

All of these policies have been written, not simply to meet statutory and other requirements, but to enable and evidence the work that the whole school is undertaking to ensure the implementation of its core values:

'To be a small, family school that genuinely focuses on the individual; ensuring each pupil reaches his or her personal potential and destination by way of a rich and diverse journey based on breadth of opportunity, support and continuously striving towards excellence.'

While this current policy document may be referred to elsewhere in Bredon School documentation, including particulars of employment, it is non-contractual.

In the school's policies, unless the specific context requires otherwise, the word "parent" is used in terms of Section 576 of the Education Act 1996, which states that a 'parent', in relation to a child or young person, includes any person who is not a biological parent but who has parental responsibility, or who has care of the child. Department for Education guidance Understanding and dealing with issues relating to parental responsibility updated August 2023, considers a 'parent' to include:

- all biological parents, whether they are married or not
- any person who, although not a biological parent, has parental responsibility for a child or young person - this could be an adoptive parent, a step-parent, guardian or other relative
- any person who, although not a biological parent and does not have parental responsibility, has care of a child or young person

A person typically has care of a child or young person if they are the person with whom the child lives, either full or part-time, and who looks after the child, irrespective of what their biological or legal relationship is with the child.

The school contracts the services of third-party organisations to ensure regulator compliance and implement best practice for:

- HR and Employment Law
- Health & Safety Guidance
- DBS Check processing
- Mandatory Safeguarding, Health & Safety, and other relevant training
- Data protection and GDPR guidance

- Specialist insurance cover

Where this policy refers to ‘employees’, the term refers to any individual who is classified as an employee or a worker, working with and on behalf of the school (including volunteers and contractors).

The school is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers, pupils and visitors to share this commitment.

All outcomes generated by this document must take account of and seek to contribute to safeguarding and promoting the welfare of children and young people at Bredon School.

The policy documents of Bredon School are revised and published periodically in good faith. They are inevitably subject to revision. On occasions, a significant revision, although promulgated in school separately, may have to take effect between the republication of a set of policy documents. Care should therefore be taken to ensure, by consultation with the Senior Leadership Team, that the details of any policy document are still effectively current at a particular moment.

## 1. Introduction

This policy should be read in conjunction with other relevant policies and protocols of the school, including:

- The Curriculum Policy
- The First Aid Policy
- The Food Policy
- The Health and Safety Policy
- The Risk Assessment Policy
- The Safeguarding Policy

Under [Section 100 of the Children and Families Act 2014](#), schools have a duty to support pupils at their school with medical conditions.

This Policy takes account of the government guidance

- [Allergy guidance for schools](#)
- [Allergen guidance for food businesses \(FSA\)](#)
- [Allergen guidance for institutional caterers \(FSA\)](#)
- [Supporting pupils at school with medical conditions](#)

It also takes account of the [Food Information Regulations 2014](#), which require school caterers to show the allergen ingredients’ information for the food they serve, including the labelling of allergens on PPDS (pre-packed for direct sale) foods.

The [Health Conditions in Schools Alliance has published a helpful guide](#) to the relevant legislation.

## 2. Food preparation and provision

The school manages the allergy risks of food preparation and provision in line with its Food Policy, including appropriate labelling of foodstuffs and meeting any special dietary needs when making changes to menus or substituting food products due to supply changes or for religious and cultural reasons, you must make sure you can continue to.

The school's **Catering Department** maintains and implements its risk assessments in line with the LACA (Local Authorities Caterers Association) guidance, [Allergen Management Guidance for catering in education](#).

## 3. Curriculum

The school includes anaphylaxis awareness in the curriculum as appropriate in each Key Stage.

## 4. Staff training

The school ensures that all staff are appropriately trained in recognising and responding to allergic reactions, including using emergency AAIs (adrenaline auto-injectors).

Staff are made aware of:

- [NHS Food allergy advice](#)
- [NHS Treatment of anaphylaxis advice](#)
- [Anaphylaxis Campaign advice: What to do in an emergency](#)
- [Using emergency adrenaline auto-injectors in schools](#)
- [Guidance on the use of adrenaline auto-injectors in schools](#)

All staff are kept appropriately aware of those students and colleagues who are diagnosed as susceptible to severe allergic reactions.

## 5. AAIs (adrenaline auto-injectors)

Staff and students

In line with the government guidance [Using emergency adrenaline auto-injectors in schools](#), the school maintains a stock of spare in-date AAIs (adrenaline auto-injectors) located appropriately for use in an emergency with a student or a staff member, where medical authorisation and written parental or staff consent has been provided.

All staff are appropriately trained in the use of AAIs (see Box 3 above).

The school's spare AAI can be administered to a student or staff member whose own prescribed AAI cannot be administered correctly without delay.

AAIs can be used through clothes and should be injected into the upper outer thigh in line with the instructions provided by the manufacturer.

If someone appears to be having a severe allergic reaction (anaphylaxis), you **MUST** call 999 without delay, even if they have already used their own AAI device or a spare AAI.

In the event of a possible severe allergic reaction in a student who does not meet the criteria, emergency services (999) should be contacted and advice sought from them as to whether administration of the spare emergency AAI is appropriate.

## 6. Summary of what to do in the event of a severe allergic reaction

This summary is taken from the DoH [Guidance on the use of adrenaline auto-injectors in schools](#).

Anaphylaxis may occur without initial mild signs: **ALWAYS** use adrenaline autoinjector **FIRST** in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY** (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.

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

- Airway:
  - Persistent cough
  - Hoarse voice
  - Difficulty swallowing, swollen tongue
- Breathing:
  - Difficult or noisy breathing
  - Wheeze or persistent cough
- Consciousness:
  - Persistent dizziness
  - Becoming pale or floppy
  - Suddenly sleepy, collapse, unconscious

**If ANY ONE (or more) of these signs are present, then you should:**

1. lie child/adult flat with legs raised: (if breathing is difficult, allow child/adult to sit)
2. use AAI (adrenaline autoinjector) without delay
3. dial 999 to request an ambulance and say ANAPHYLAXIS

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

**After giving adrenaline:**

1. Stay with child/adult until the ambulance arrives, do **NOT** stand the child up

2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement after 5 minutes, give a further dose of adrenaline using another autoinjector device, if available.

**Practical points:**

- When dialling 999, give clear and precise directions to the emergency operator, including the postcode of your location.
- If the student's / adult's condition deteriorates and a second dose of adrenaline is administered after making the initial 999 call, make a second call to the emergency services to confirm that an ambulance has been dispatched.
- Send someone outside to direct the ambulance paramedics when they arrive.
- Tell the paramedics:
  - if the child/adult is known to have an allergy
  - what might have caused this reaction, eg recent food
  - the time the AAI was given

Anaphylaxis may occur without initial mild signs: ALWAYS use adrenaline autoinjector FIRST in someone with known food allergy who has SUDDEN BREATHING DIFFICULTY (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.

**7. Review of implementation**

The implementation of this Policy is reviewed annually by the school's Senior Leadership Team in consultation with staff, and a report is made to the Governing Body.

The school may submit to Cavendish Education proposals for amendments to this Policy.

