Insert school Logo

Allergy Safety Policy

This Allergy Safety Policy

has been approved and adopted by the Xavier Catholic Education Trust in Sep 2026 and will be reviewed in July 2027.

Committee Responsible: Audit and Risk Committee

N.B. This policy is a framework and should be seen as a template for developing a policy that meets the needs and context of individual schools. Please review the template and amend with information relevant to the individual school context.

Xavier Catholic Education Trust Mission Statement

Our mission is to inspire, nurture and fulfil the calling of every person we encounter and the potential of every school we serve; growing together in faith, hope and love.

Everything we do in Catholic education is to ensure that every child we teach and every person we work with has the opportunity to realise their own calling and become the best version of themselves.

Our aim is to enable potential with the highest-quality provisions, to go out into the world and make our unique contribution for the greater good of all God's people here on Earth.
This is particularly important for the children, who are at the start of their journey to fulfil their calling and only get one chance at experiencing high-quality provision in school.

1. Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

The Trust is committed to providing a safe, inclusive and supportive environment for pupils, staff and visitors with allergies. Effective allergy management relies on clear lines of responsibility and a collaborative approach involving the Trust, school leaders, staff, pupils, parents/carers and, where appropriate, healthcare professionals. The responsibilities outlined below are intended to support the effective implementation of this policy and should be read alongside any school-specific procedures and individual healthcare plans.

3.1 Trust Board

Responsible for:

- Ensuring appropriate allergy management arrangements exist across the Trust
- Approving and reviewing The Allergy Safety Policy
- Receiving assurance regarding compliance where required

3.2 Local Governing Committee

Responsible for:

- Seeking assurance that the school is implementing the Trust policy
- Monitoring local compliance through routine safeguarding/health and safety reporting

3.3 Allergy safety lead

The nominated allergy safety lead is [insert staff member's name here. This should be a member of the Senior Leadership Team (SLT)

They are responsible for:

- Implementing this allergy safety policy
- Ensuring the allergy safety policy is amended with information relevant to the individual school context and the policy is published on the school website.
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP)
    - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
    - All staff receive regular allergy awareness training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
    - What lessons there are to learn
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP

3.4 Headteacher

The headteacher is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances

3.5 Two named volunteers among school staff

[Insert role here] are responsible for:

- Checking spare Adrenaline Auto-Injectors (AAIs) are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach

3.6 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead

3.7 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.8 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AAI on their person and only using it for its intended purpose
- Understanding how and when to use their AAI

3.9 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers

4. Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers annually asking them to update their child's medical information as necessary [for example, via Arbor)

We ask that parents/carers proactively inform us by either phone call to the school [insert contact number] or an email to [insert staff role and contact email] if their child's medical needs change during the school year.

Add any other school arrangements for identifying pupils at risk.

4.2 Identifying staff and visitors at risk

We will:

- Ask new staff to provide details of their allergies in advance of their start date
- Ask visitors to provide details of their allergies in advance of their visit
- Add any other school arrangements for identifying staff and visitors with known allergies.

4.3 Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the pupil while they are at school or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The headteacher is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

4.4 Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Register of pupils with known allergies

- The school maintains a register of pupils who have a known allergy. The register includes:
    - Known allergens and risk factors for anaphylaxis
    - Whether a pupil has been prescribed ADs (and if so, what type and dose)
    - Where a pupil has been prescribed an AD, whether parental consent has been given to administer emergency medication
    - A photograph of each pupil to allow a visual check to be made (this will require parental consent)

- The register is kept in a location easily accessible to staff and in areas where food is served or handled and can be checked quickly by any member of staff as part of initiating an emergency response. Allowing all pupils to keep their ADs with them will reduce delays and allows for confirmation of consent without the need to check the register (secondary schools may include).

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

6. Minimising risk

The Trust and its schools are committed to taking reasonable and proportionate steps to minimise the risk of individuals with allergies coming into contact with known allergens. While it is not always possible to eliminate risk entirely, schools will implement appropriate preventative measures, undertake risk assessments where required, and maintain effective procedures to reduce the likelihood of allergic reactions.

6.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Pupils have their own named water bottles, and lunch boxes provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance

Add any other arrangements to prevent contamination in your school

6.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers
- Where changes are made to school menus, we will make sure these comply with legislation, and continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)

- Where food is provided by the school, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

6.3 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- Outdoor eating areas should be monitored and kept free from food waste where possible.
- Pupils and staff should avoid disturbing insect nests, hives or swarms.
- Bins should be covered and emptied regularly to reduce the attraction of insects.
- Sweet foods and drinks should be consumed with care when outdoors.
- Pupils should be encouraged to check food and drink before consuming them outdoors.
- Staff should be aware of pupils with known insect sting allergies and ensure their medication is readily accessible during outdoor activities

Add any other school procedures for preventing and dealing with insect bites/stings.

6.4 Animals

Insert hygiene procedures for managing allergies to animals such as dogs, if relevant for your school context. For example:

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will not interact with animals
- Parents/carers will be informed in advance where animals are expected to be present in school or as part of educational activities, where reasonably practicable
- Appropriate risk assessments will be undertaken before animals are brought onto the school site or included in school activities
- Areas used for animal-related activities will be cleaned appropriately following use
- Staff will be aware of pupils with known animal allergies and take reasonable steps to minimise their exposure to allergens
- Animals will only be permitted in areas of the school where it is appropriate and safe to do so
- Consideration will be given to seating arrangements, classroom locations and activity planning where a pupil has a known animal allergy
- Any allergic reaction associated with contact with an animal will be managed in accordance with the pupil's healthcare plan and the procedures set out in this policy
- Where assistance dogs or visiting animals are present, the school will take reasonable steps to balance accessibility requirements with the needs of pupils and staff who have animal allergies

Add any other school procedures for managing allergies to animals

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own Adrenaline Devices (ADs) with them
- Staff trained to administer adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AD protocols for off-site events and school trips

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
  - The pupil does not have a prescribed AD
  - The pupil's prescribed AD is not available or misfire

[Add any specific arrangements your school has in place for responding to allergic reaction].

8. Adrenaline devices (ADs)

The school is committed to ensuring the safe management and effective use of adrenaline devices for pupils who are at risk of anaphylaxis. Appropriate arrangements will be in place for the storage, monitoring, accessibility and administration of prescribed and spare ADs, both on school premises and during off-site activities.

8.1 Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Pupils with prescribed ADs should take them home with them at the end of each school day (unless alternative arrangements have been agreed with the school), and parents are responsible for ensuring that they are in date.

If a pupil cannot keep their ADs with them in the classroom (due to age or other considerations), then the devices will be stored in a clearly identified, agreed location that is known to relevant staff and can be accessed immediately in an emergency. Schools will ensure that storage arrangements enable rapid access throughout the school day, including during lessons, breaktimes, lunchtimes, physical education activities and extracurricular activities.

They will be stored:

- In an appropriate central location that is unlocked and accessible at all times
- No more than 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Pupils who are assessed as competent to do so will be encouraged to carry their prescribed ADs with them at all times. Where this is not appropriate due to age, maturity or individual circumstances, schools will implement alternative arrangements to ensure the device remains readily accessible.

When pupils are participating in off-site visits, educational visits, sporting activities or other activities away from their usual classroom location, a member of staff will ensure that prescribed ADs and relevant allergy action plans accompany the pupil and remain readily accessible at all times.

Schools will ensure that staff supervising playgrounds, sports facilities, dining areas and other locations where pupils may be present are aware of how to access prescribed ADs quickly and understand the procedures to follow in the event of an allergic reaction.

Appropriate arrangements will also be in place to support pupils travelling between sites or attending activities before and after the school day, ensuring access to prescribed ADs is maintained wherever reasonably practicable

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

Parents/carers are responsible for ensuring that their child's prescribed ADs remain in date and available for use. Where ADs are stored by the school, parents/carers may be required to take devices home during school holidays or when replacement is required.

Schools will implement procedures for monitoring expiry dates and the condition of prescribed ADs. Parents/carers will be notified when devices are approaching their expiry date or require replacement. Where replacement medication is requested, parents/carers should provide new devices as soon as reasonably practicable to ensure continuous availability of emergency medication.

The school will maintain an accurate and up-to-date register of pupils who have been prescribed adrenaline devices and/or have an allergy action plan. This information will be recorded within the school's management information system and/or medical needs register and will include the pupil's allergy, prescribed medication, location of medication (where applicable), emergency contact details, parental consent arrangements and the date of the most recent allergy action plan. The register will be reviewed regularly to ensure information remains current and accurate.

8.2 Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school's spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma reliever inhaler and ensuring they are stored according to the guidance.

- ADs will be sourced from a local pharmacy
- The school will obtain two pairs of AAIs of the correct dosage for their pupils
- Schools are recommended to buy a single brand to avoid confusion

Spare ADs will be stored:

- In an appropriate central location that is unlocked and accessible to staff only at all times
- No more than 5 minutes away from where they may be needed (larger schools may require ADs to be stored in multiple locations, such as near the dining area and playground)
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion

[Insert name of at least 2 staff members] are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliever inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions.

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events.

For educational visits, residentials, sporting fixtures and other off-site activities, schools will ensure that appropriate spare ADs accompany the visit wherever there is a foreseeable risk that they may be required. Spare ADs will be stored securely but remain readily accessible to trained staff at all times, and arrangements will form part of the visit risk assessment and planning process.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

9.1 Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident recording system, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a pupil aged up to 16 should be notified of the incident or 'near miss' as soon as possible. [**Secondary schools insert:** In the case of a pupil aged 16 and over, the school will confirm that the pupil agrees that their parents/carers should be informed.]

The school will share the report with the pupil's parents, the pupil or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with [insert the name or role of your designated leader responsible for medical conditions and/or allergy]. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident recurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalisation. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See how to make a RIDDOR report]

- [Insert if your school operates as a food business] To the local authority: any allergen-related food safety incidents.

In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

The school recognises that raising awareness and understanding of allergies is essential to maintaining a safe and inclusive environment for all pupils, staff and visitors. All schools will promote allergy awareness throughout their communities and ensure that staff are equipped with the knowledge and skills required to reduce risk, recognise allergic reactions, respond effectively to emergencies and support pupils with allergies. The school will ensure that all supply and cover staff are appropriately informed about pupils with allergies, familiar with the school's allergy safety procedures, and have received appropriate allergy awareness training for their role.

10.1 Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school has purchased 'training pens' from EpiPen and Jext so staff can practice safely and be familiar with the differences.

The school will conduct allergy safety drills annually. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that 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/carers
  - How to locate and administer emergency medication
  - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing

- Understand the school's 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')

10.2 Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

The school will ensure pupils are taught about allergies and promote allergy awareness through its PSHE curriculum, ensuring pupils develop an age-appropriate understanding of allergies, the importance of respecting individual medical needs, and the role they can play in helping to create a safe and inclusive environment for all.

11. Wellbeing

The school recognises that living with an allergy can have a significant impact on a pupil's emotional wellbeing, confidence and sense of inclusion. Pupils with allergies may experience anxiety relating to accidental exposure to allergens, the risk of severe allergic reactions, or the management of associated medical conditions such as asthma or eczema. The school is committed to creating a supportive environment by implementing robust allergy management procedures, providing reassurance that effective control measures are in place, and ensuring that appropriate support is available to pupils and their families. The school will also promote understanding and inclusion, and will not tolerate bullying, teasing, discrimination or exclusion related to allergies. Any concerns will be addressed promptly in accordance with the school's behaviour and anti-bullying procedures to help ensure that all pupils feel safe, respected and supported.

Pupils with allergies will have additional support through:

- Consideration of pupils' views when developing and reviewing support arrangements that affect them
- Pastoral care and access to appropriate emotional wellbeing support
- Regular check-ins with their class teacher, form tutor or other nominated member of staff
- Individual healthcare plans and allergy action plans that are regularly reviewed and updated
- Reasonable adjustments to enable full participation in school life, including trips, visits, clubs and enrichment activities
- Reassurance that steps are being taken to minimise the risk of exposure to allergens and that robust emergency procedures are in place
- Support during key transition periods, including starting school, moving classes or transferring to another setting
- Opportunities for pupils and parents/carers, to discuss concerns relating to allergy management and safety

- Promotion of an inclusive environment that encourages understanding and respect for pupils with allergies
- Education through the curriculum and wider school activities to raise awareness of allergies and reduce stigma
- Prompt action to address any bullying, teasing, discrimination or exclusion related to allergies, in accordance with the school's behaviour and anti-bullying policies
- Appropriate support following an allergic reaction, anaphylaxis incident or near miss
- Working in partnership with parents/carers and relevant professionals to ensure individual needs are met

11.1 Wellbeing support following an incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the pupil but their family, those involved in responding and any witnesses.

The school will support staff involved in any incident or 'near miss'.

12. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with the Xavier Data Protection Policy.

13. Monitoring arrangements

The implementation of this policy will be monitored locally by the school's Allergy Safety Lead and Headteacher.

Schools will review any school-specific procedures and appendices annually and following any significant incident, near miss, legislative change or updated guidance.

This policy framework will be reviewed annually by Xavier Catholic Education Trust and approved through the Trust's governance arrangements.

Schools must ensure that any local amendments are limited to operational arrangements specific to their setting.

14. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- Data protection policy
- Behaviour policy