

School Vision and Values

FROM ALPHA TO OMEGA



‘Life in all its fullness’

(JOHN 10:10)

At Emmanuel Church of England School, broad opportunities are provided for individuals to develop their full potential and allow them to be healthy, happy and secure.

Building on our Christian ethos and in partnership with the whole school community, we provide a stimulating and caring environment where individuals are valued and nurtured morally, spiritually and academically.

It is a primary aim of our school that every member of the school community feels cared for, valued, respected, and that each person is treated fairly and well. This is promoted through our school values; where children learn to be respectful, to forgive and to move on so that they can experience:

‘Life in all its fullness’ – John 10:10

Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how the school manages allergies
- Pupils with allergies, including those at risk of anaphylaxis, are safe and supported
- The risk of exposure to allergens is minimised
- Staff are trained to recognise and respond to allergic reactions quickly and effectively
- Pupils with allergies can participate fully in all aspects of school life

The governing board will implement this policy by:

- Ensuring sufficient staff are appropriately trained
- Ensuring clear systems are in place to identify and support pupils with allergies
- Supporting the development and regular review of Individual Healthcare Plans (IHPs) and Allergy Action Plans (AAPs)
- Ensuring emergency medication is available and accessible
- Monitoring the effectiveness of allergy management procedures

The named person with responsibility for implementing this policy is the **Inclusion Leader and Admin Assistant**.

Legislation and statutory responsibilities

This policy meets the requirements of the Children and Families Act 2014 and the Equality Act 2010, ensuring that children with allergies and related medical conditions are properly supported and protected from discrimination. It is also informed by the statutory guidance Supporting Pupils at School

with Medical Conditions, which requires settings to have clear procedures in place to manage health needs effectively, as well as the Food Information Regulations 2014 in relation to allergen awareness and food safety. This policy should be read in conjunction with the school's Supporting Children with Medical Conditions policy, as both reflect the same statutory responsibilities to safeguard children's health, promote inclusion, and ensure that appropriate care and support are consistently provided.

Roles and Responsibilities

The Governing Board

The governing board has overall responsibility for ensuring that arrangements are in place to support pupils with allergies. They will ensure that staff are trained and that this policy is implemented effectively.

The Inclusion Lead

The Inclusion Lead and Admin Assistant will:

- Ensure all staff are aware of this policy and understand their responsibilities
- Maintain an up-to-date register of pupils with allergies
- Ensure that IHPs and AAPs are in place, reviewed and accessible
- Ensure that appropriate training is provided
- Oversee risk assessments relating to allergies
- Liaise with parents and healthcare professionals

Staff

All staff will:

- Be aware of pupils with allergies in their care
- Know how to access IHPs and AAPs
- Recognise the signs of allergic reactions, including anaphylaxis
- Follow emergency procedures and administer medication where trained
- Take reasonable steps to minimise exposure to allergens
- Promote a safe and inclusive environment

Parents

Parents will:

- Provide accurate and up-to-date information about their child's allergies
- Provide prescribed medication, including at least two in-date adrenaline auto-injectors where required
- Provide a completed Allergy Action Plan from a healthcare professional
- Inform the school of any changes to their child's condition

Pupils

Pupils will be supported to:

- Develop awareness of their allergies where appropriate
- Avoid known allergens

- Inform staff if they feel unwell
- Carry and manage their medication where appropriate and when agreed.

School nurses and other healthcare professionals

Healthcare professionals will support the school by:

- Providing Allergy Action Plans
- Advising on management and treatment
- Supporting staff training where appropriate

Identification and Information Sharing

The school will:

- Maintain an up-to-date list of pupils with allergies
- Ensure all relevant staff are informed
- Ensure that supply staff and visitors are made aware where necessary
- Clearly identify pupils with allergies in registers and relevant systems

Allergy information will be handled sensitively and shared on a need-to-know basis. Information about pupils with allergies will be actively communicated to all relevant staff through staff briefings, clear and accessible records, and, where appropriate, visual identifiers such as photographs or classroom notices. Allergy information will be shared in advance of trips, activities and events to ensure appropriate planning and risk management.

Individual Healthcare Plans (IHPs) and Allergy Action Plans (AAPs)

All pupils with significant allergies will have:

- An Individual Healthcare Plan (IHP) Appendix 1
- A healthcare professional-completed Allergy Action Plan (AAP)

The headteacher has overall responsibility for the development of IHPs and AAPs for pupils with allergies. This has been delegated to Inclusion Leader and Admin Assistant.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

These plans will include:

- Allergens and triggers
- Signs and symptoms
- Medication and dosage
- Emergency procedures

Plans will be:

- Easily accessible to staff
- Stored with medication where appropriate

- Reviewed at least annually or sooner if required

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or pediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of an education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN may be mentioned in the IHP if relevant.

The IHP and AAP for each child is kept in a clearly identified and accessible place, so that it can be consulted in an emergency. A copy of the IHP will also accompany the pupil on any school trip or off-site outing. The IHP and AAP will accompany the pupil should they need to attend hospital, and includes parental permission for sharing it within an emergency setting.

Master copies all IHPs and AAPs are saved on the school network.

Allergy Management and Risk Reduction

The school will take reasonable steps to reduce exposure to allergens, including:

- Promoting regular handwashing
- Cleaning surfaces and shared equipment
- Supervising food consumption
- Discouraging food sharing

The School supports the approach advocated by many allergy charities towards nut bans/nut free schools. Nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. We advocate for and foster a culture of allergy awareness and education. This aims to it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

The school will work closely with catering providers to ensure that allergen information for all school meals is accurate, up to date and readily available. Reasonable adjustments will be made to meal provision where required, and clear communication will be maintained between school staff, catering teams and parents to ensure pupils with allergies can eat safely.

The use of food in classroom activities, rewards or by external visitors will be carefully considered and subject to appropriate risk assessment where pupils with allergies are present. Staff will ensure that any such activities are planned in a way that minimises risk and maintains a safe environment for all pupils.

Medication and Emergency Equipment

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist
- Have an Administration of Medication form completed with instructions for administration, dosage and storage.

All medicines will be stored safely in the class medical bags. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as adrenaline pens will always be readily available to pupils and not locked away.

Parents are asked to collect all medications/equipment as soon as they are about to expire, and to provide new and in-date medication whenever necessary or at the start of each new term. Out-of-date medication will be returned to the parent for safe disposal.

- Pupils at risk of anaphylaxis should have access to at least two adrenaline auto-injectors
- Medication must be in-date, clearly labelled and readily accessible
- The school will hold spare adrenaline auto-injectors in line with statutory guidance

Medication will not be locked away and will be available at all times.

Managing Allergic Reactions

Staff will:

- Act immediately when an allergic reaction is suspected
- Follow the pupil's AAP
- Administer medication without delay
- Call 999 in cases of suspected anaphylaxis
- Stay with the pupil until help arrives

Appendix 2 - Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.

In the event of anaphylaxis:

- Administer an adrenaline auto-injector immediately
- Call 999 and state "anaphylaxis"
- Administer a second dose if required (after 5 minutes if no improvement)
- Do not leave the pupil unattended
- Parents will be informed as soon as possible.

Appendix 3 - First Aid for Anaphylaxis poster

Appendix 4 - EPIPEN AAI Instructions

Appendix 5 - JEXT AAI Instructions

All allergic reactions and near-miss incidents will be recorded and reviewed to identify any learning, and Individual Healthcare Plans and procedures will be updated where necessary.

Training

All staff will receive suitable and sufficient training care for pupils with allergies.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with allergies will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Inclusion Leader. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Many members of staff are trained in First Aid. When their First Aid qualification expires, arrangements are made for that member of staff to attend a refresher course.

School Trips and Activities

The school will ensure pupils with allergies can participate fully by:

- Carrying medication, IHPs and AAPs on trips
- Conducting appropriate risk assessments
- Ensuring trained staff are present
- Involving parents in the planning stage when appropriate (such as on residential trips)

Allergy Bullying and Wellbeing

The school recognises that pupils with allergies may be vulnerable to bullying.

Any incidents of:

- Teasing
- Food-related threats
- Deliberate exposure to allergens

will be treated as serious and dealt with in line with the school's behaviour and safeguarding policies.

Record Keeping

The school will maintain accurate records of:

- Pupils with allergies

- IHPs and AAPs
- Medication administration
- Training undertaken by staff

IHPs and AAPs are kept in a readily accessible place which all staff are aware of.

Other school staff, including temporary, supply and support staff, are made aware of the IHP for any child in their care and are told where they can access a copy. All children with allergies or other medical needs are identified to their class teacher, and supply staff are always given this annotated register.

The governing board will ensure that written records are kept of all medicine administered to pupils. When a member of staff administers medicine to a pupil they will log this on the 'Administering Medication to Pupils' form (Appendix 6) located in a folder in the Medical Room. Parents will be informed if their pupil has been unwell at school.

Unacceptable practice

It is not acceptable to:

- Ignore medical advice or Allergy Action Plans
- Delay the administration of medication
- Prevent access to emergency medication
- Allow unsafe food practices
- Exclude pupils unnecessarily from activities

Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Inclusion Leader in the first instance. If the Inclusion Leader cannot resolve the matter, they will direct parents to the school's complaints procedure.

Monitoring arrangements

This policy will be reviewed and approved by the governing board every three years.

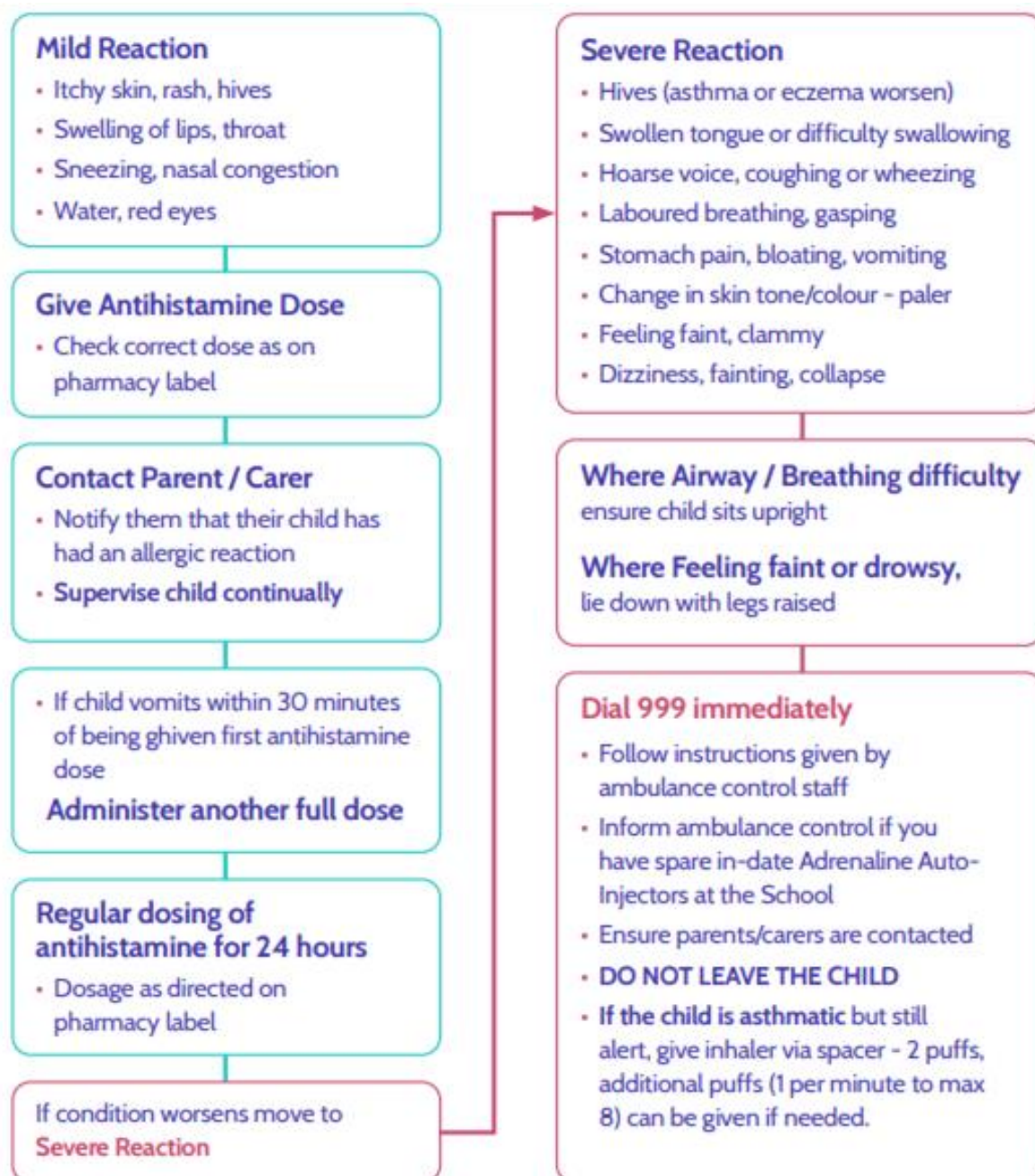
Policy reviewed	July 2026
Agreed review schedule	Annually
Next review due	July 2027



Emmanuel Primary School
INDIVIDUAL HEALTH CARE PLAN
CONFIDENTIAL

Name:		Date of birth:	
<u>People contributing to this plan:</u>			
<u>Date of plan:</u> (today's date)			
<u>Medical condition:</u>			
<u>Details of medication:</u>		<u>Expiry date of medication:</u>	
<u>Child's personal symptoms:</u>			
<u>Daily care requirements:</u>			
<u>What constitutes an emergency for the child?</u>			
<u>What action should be taken in an emergency?</u>			
<u>Any follow-up care:</u>			
<u>Emergency contacts:</u>			
Name:		Relationship:	
Phone/Mobile Number:			
Name:		Relationship:	
Phone/Mobile Number:			
<u>Clinic/Hospital contact:</u>			
Name:			
Phone Number:			

Parent/Carer Signature: _____ Date: _____





FIRST AID FOR ANAPHYLAXIS

Recognise the Signs of Anaphylaxis...

A Airways	B Breathing	C Circulation
• Persistent cough • Hoarse voice • Difficulty swallowing • Swollen tongue	• Difficult or noisy breathing • Wheeze or persistent cough	• Persistent dizziness • Pale or floppy • Suddenly sleepy • Collapse/unconscious

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening. Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

ANAPHYLAXIS: ACTIONS TO TAKE

If any one or more of the above ABC symptoms are present, take these steps.

1. Administer an Adrenaline Auto Injector (AAI) without delay

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, give the AAI, it will not harm them.



2. Dial 999 and say anaphylaxis ('ana-fill-axis')

Stay with the person until the ambulance arrives. **DO NOT** let them stand up and walk around.



3. The person should lie down immediately

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.



4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes

If there is no sign of life, start CPR immediately until help arrives.

Please learn these steps. This is life-saving information.

You never know when you will need to act in an anaphylaxis emergency.



Natasha Allergy Research Foundation
The UK's Food Allergy Charity

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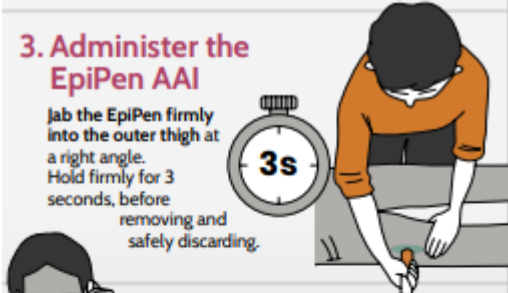
Registered charity England & Wales (1181098) Scotland (SC051610). Based on BSAC and 2023 MHRA guidance.

ANAPHYLAXIS

HOW TO USE EPIPEN AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Remove the blue safety cap Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. Remember: Blue to the Sky, Orange to the Thigh! 	5. Lie the person down with legs raised immediately If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side. 
2. Position the orange tip Hold the EpiPen at 90°, approximately 10cm away from the leg, with the orange tip pointing towards the outer thigh. 	6. If there are no signs of improvement after 5 minutes, use a second EpiPen AAI The person should remain still and lying down until the ambulance arrives. Don't try to get up, even if you start to feel better.
3. Administer the EpiPen AAI Jab the EpiPen firmly into the outer thigh at a right angle. Hold firmly for 3 seconds, before removing and safely discarding. 	7. Start CPR If there are no signs of life, start CPR immediately until help arrives. 
4. Once the EpiPen AAI has been administered call 999 Ask for an ambulance and say "ana-fill-axis". 	

For more information
on EpiPen AAls >>



Sign up to the free expiry alert service
and receive reminders by text or email when your EpiPen is about to expire >>





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Registered charity England & Wales (1181098) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance. Source: EpiPen.

ANAPHYLAXIS

HOW TO USE JEXT AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Hold the Jext AAI in the hand you write with Hold with your thumb closest to the yellow cap. Pull off the yellow cap with your other hand. 	5. Once the Jext AAI has been administered call 999 Ask for an ambulance and say "ana-fill-axis". 
2. Place the black injector tip against the outer thigh Hold the injector at a right angles (approx. 90°) to the thigh. 	6. Lie the person down with legs raised immediately If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side. 
3. Push the black tip as hard as you can into the outer thigh Wait until you hear a 'click' confirming the injection has started, then keep it pushed in. Hold the injector firmly in place against the thigh for 10 seconds (a slow count to 10) then remove. The black tip will extend automatically and hide the needle. 	7. If there are no signs of improvement after 5 minutes, use a second Jext AAI The person should remain still and lying down until the ambulance arrives. Don't try to get up, even if you start to feel better.
4. Massage the injection area for 10 seconds	8. Start CPR If there are no signs of life, start CPR immediately until help arrives. 

For more information on Jext AAIs >>



Sign up to the free expiry alert service and receive reminders by text or email when your Jext AAI is about to expire >>





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Registered charity England & Wales (181098) Scotland (SC056103). Based on BSACI and 2023 MHRA guidance. Source: Jext.

Appendix 6: Administering Medication to Pupil Record



Administering Medication To Pupils

<u>Date</u>	<u>Pupil Name</u>	<u>Time</u>	<u>Name of Medicine</u>	<u>Dose Given</u>	<u>Any reactions</u>	<u>Staff Name</u>	<u>Staff Signature</u>