Allergy Safety Policy

1. Aims and Objectives

1.1. This policy outlines Reed's School (RS) and Ripley Court School (RCS), "the School", approach to allergy management, in line with the Department for Education's draft (statutory) guidance published in 2026 (Supporting children and young people with medical conditions and allergy). It also incorporates the requirements of Benedict's Law which came into force in September 2026.

1.2. Benedict's Law introduced a consistent national framework for allergy safety in schools, requiring whole-school allergy procedures, mandatory staff training, access to adrenaline devices, and the creation of Individual Healthcare Plans (IHPs) for pupils with allergies.

1.3. This policy outlines how the whole-school community works to reduce the risk of an allergic reaction occurring, and the procedures in place to respond effectively if one does. It also sets out how the School supports its pupils and staff to ensure their wellbeing and inclusion, as well as demonstrating its commitment to being an allergy-aware school.

1.4. This policy applies to all staff, pupils, parents and visitors to the School and should be read alongside the Medical Conditions Policy and other related policies including:

- First Aid Policy
- Minibus Policy
- Educational Visits & Recreational Holiday's Policy (RS)
- External Visits Policy (RCS)

1.5. The School's position is not to guarantee a completely allergen-free environment, but rather to minimise the risk of exposure by hazard identification, instruction, and information. This will encourage self-responsibility in older pupils (RS) with known allergens. Younger pupils (RCS) are supported by staff and parents/guardians as required to begin the process of self-responsibility.

2. What is an allergy?

2.1. Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

2.2. Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is life-threatening medical emergency.

2.3. People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

2.4. An allergy is different to an intolerance. Whilst an intolerance may cause uncomfortable symptoms it does not involve the immune system.

3. Definitions

3.1. *Allergen:* A normally harmless substance that, for some, triggers an allergic reaction. A person can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

3.2. Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc.), sesame, fish, shellfish, soya and wheat.

3.3. There are 14 allergens required by UK law to be highlighted on pre-packed food, referred to as the 'main 14' in this policy. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide) and sesame.

3.4. *Anaphylaxis:* Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

3.5. *Adrenaline Auto-Injector (AAI):* Single-use device which carries a pre-measured dose of adrenaline. Adrenaline Auto-Injectors are commonly referred to as AAIs, adrenaline pens, or by the brand name Epi-Pen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this policy they are referred to as Adrenaline Devices or Ads to include other devices such as EURNeffy (see below).

3.6. *Allergy Action Plan:* This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.

3.7. *Asthma*: Asthma is a common, long-term condition which effects the lungs. People with asthma have airways that are more sensitive and can become inflamed and narrow on exposure to certain triggers. This can lead to difficulty in breathing.

3.8. *Asthma Action Plan*: This is a document filled out by a healthcare professional, detailing a person's asthma, information about triggers, symptoms, medicines to be used if the person has asthma symptoms, and when to seek emergency help when they have an asthma attack.

3.9. *Designated Allergy Lead:* The member of staff responsible for overseeing allergy and asthma management across the School and acting as the main point of contact

for pupils, parents and staff. This is referred to as the named senior leader in the statutory guidance.

3.10. *Emergency Response Plan*: A document (also known as a Critical Incident Plan) that outlines the School's procedure for managing an emergency and should be fit for purpose to manage a serious allergic reaction (anaphylaxis).

3.11. *EURneffy:* Eurneffy (also known as Neffy) is a single use nasal spray which delivers 2mg of adrenaline. It is a needle-free alternative to an adrenaline auto-injector.

3.12. *Individual Healthcare Plan (IHP)*: A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document is created by the School in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy that requires active management should have an IHP and it should be read in conjunction with their Allergy Action Plan, where this has been provided by their clinician.

3.13. *Risk Assessment:* A detailed document outlining an activity, the risks it poses and any actions taken or to be taken to mitigate those risks. Allergy should be included in all risk assessments for events on and off the school site.

3.14. *Spare Adrenaline Devices*: The School purchases spare adrenaline devices. These are held as a back-up, in case pupils' prescribed adrenaline devices are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

4. Roles and Responsibilities

4.1. Named Allergy Governor

4.1.1. The Named Allergy Governor is Maureen Adams. She works in partnership with the Designated Allergy Lead to ensure allergy safety is overseen at Governing Body level. She is responsible for:

- ensuring allergy-related risks are included on the School's risk register and actively managed by the Governing Body;
- providing strategic oversight of the School's Allergy Safety Policy, ensuring it is reviewed at least annually and published on the School's website;
- acting as the Governing Body's named point of contact for allergy-related matters;
- satisfying herself that the School's allergy management arrangements meet legal and statutory requirements and reflect best practice;
- receiving regular updates for the Designated Allergy Lead and ensuring the Governing Body is appropriately sighted on allergy compliance; and
- reviewing records of allergic reaction incidents and near-misses and ensuring the School acts on any learnings to reduce the risk of future incidents.

4.2. Designated Allergy Leads

4.2.1. The Designated Allergy Lead for Reed's School is Des Thompson. He reports to Mark Hoskins (Executive Headmaster) and Maureen Adams (Named Allergy Governor).

4.2.2. The Designated Allergy Lead for Ripley Court School is Charlotte Chapman. She reports to Gavin Ryan (Headmaster) and Maureen Adams (Named Allergy Governor).

4.2.3. They are each responsible, at the relevant school, for:

- leading the publication and implementation of a school-wide Allergy Safety Policy;
- ensuring the safety, inclusion and wellbeing of pupils, staff and visitors with an allergy;
- taking decisions on allergy management across the School;
- championing and practising allergy and asthma awareness across the School;
- being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- ensuring allergy information is recorded, up-to-date and communicated to staff;
- making sure all staff are appropriately trained annually, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- ensuring staff, pupils and parents have a good awareness of the School's Allergy Safety Policy, and other related procedures;
- reviewing the School's stock of spare adrenaline devices (checking the School has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline devices are stored appropriately) and ensuring staff know where they are;
- keeping a record of any allergic reactions or near-misses, reporting these to the Governing Body and appropriate authority (e.g. Under RIDDOR – see Health & Safety Policy) where necessary, investigating the incidents and ensuring that the findings of investigations into incidents are used to update relevant policies and procedures;
- regularly reviewing and updating the Allergy Safety Policy; and
- ensuring there is an anaphylaxis drill at least once per year and that lessons learned are used to update the Allergy Safety Policy and school procedures as appropriate.

4.2.4. The Designated Allergy Lead will monitor implementation of this policy, review procedures at regular intervals and report to the Senior Leadership Team and Named Allergy Governor as appropriate, via the Health & Safety Committee on an annual basis.

4.3. Medical Centre (Reed's)/Office Manager (Ripley Court)

4.3.1. They are each responsible, at the relevant school, for:

- collecting and coordinating the paperwork (including Allergy Action Plans, Asthma Action Plans and Individual Healthcare Plans) and information from families to ensure that arrangements are in place before the pupil starts, or within 2 weeks for a mid-year transfer, liaising with the Admissions Team as needed;

- working with HR to keep an updated list of staff with allergies (and creating an IHP if necessary) and ensuring arrangements are in place to support them;

- supporting the Designated Allergy Lead and Clubs Co-ordinator (RCS) with disseminating this information to all school staff, including the catering team, occasional staff and those running clubs;

- ensuring the information from families is up-to-date and reviewed annually (at a minimum), co-ordinating medication with families and ensuring medication is in date. This should be in place before a school visit, an Open Day or Taster Days if food is offered or like to be eaten or if a child is likely to be left at the School without a parent/carer.

- keeping an adrenaline device register to include the School stock of adrenaline devices location of spare adrenaline devices, including brand, dose and the expiry date

- reviewing the School's stock of spare adrenaline devices (checking the School has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline devices are stored appropriately and are where they should be, are easily accessible in an event of an emergency and that they are in date and replaced when necessary) and ensuring staff know where they are;

- providing on-site adrenaline device training for staff and pupils and refresher training as required;

4.4. Admissions Team

4.4.1. The admissions team is likely to be the first to learn of a pupil's allergy. They should work with the Designated Allergy Lead and School Medical Centre (Reeds)/Office Manager (RCS) to ensure that:

- there is a clear method to capture allergy information or special dietary information at the earliest opportunity;

- there is a clear structure in place to communicate this information to the relevant parties (i.e. the Medical Centre(Reeds)/Office Manager(Ripley Court), Catering Team)

- parents and applicants are informed of catering arrangements during admissions events;

- plans are made for emergency medication if the child is to be left without parental supervision; and

- there is liaison with the child's future school, to ensure a smooth transition between settings.

4.5. All staff

4.5.1. All school staff, including teaching staff, support staff, occasional staff (for example sports coaches, and afterschool clubs at RCS) are responsible for:

- championing and practising allergy and asthma awareness across the School;

- reading, understanding and putting into practice the Allergy Safety Policy and related procedures, and asking for support if needed;

- being aware of pupils (and staff, when necessary) with allergies and what they are allergic to;

- considering the risk to pupils with allergies posed by activities or posed by an activity and assessing whether the use of any allergen in activity is necessary and/or appropriate;

- ensuring pupils always have access to their medication, including carrying it on their behalf if necessary;

- being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;

- taking part in training and anaphylaxis drills as required (at least once a year). Whilst it is the School's responsibility to ensure staff have received annual training, if the member of staff is aware that they have not received any allergy training in the last 12 months they should alert the Head of Compliance;

- considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the School's anti-bullying policy;

- forwarding any communication or information that comes directly to them from parents/guardians regarding allergens to the Medical Centre (Reed's)/Office Manager (Ripley Court); and

- ensuring that pupils have their medication and that the Allergy Action Plan or IHP for that pupil is readily available when leaving the School site for any offsite activity.

4.6. Parents/guardians

4.6.1. All parents/guardians (whether their child has an allergy or not) are responsible for:

- being aware of and understanding the School's Allergy Safety Policy and considering the safety, inclusion, and wellbeing of pupils with allergies;
- providing the Registrar/Medical Centre(Reed's)/Office Manager(Ripley Court) with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the School of any related conditions, for example, asthma, hay fever, rhinitis or eczema;
- considering and adhering to any food restrictions or guidance the School has put in place when providing food, for example in packed lunches, as snacks or for fundraising events. In addition, RCS Parents/guardians are responsible for ensuring that no food products are brought onto site for children to consume at after school clubs/activities. Any food, such as birthday cakes, sweets etc, brought in by children to be shared with other children, must be placed in school bags and only consumed after leaving the premises. Parents are responsible for ensuring that any food given in this manner is safe for their child to consume.
- refraining from telling the School their child has an allergy or intolerance if this is a preference or dietary choice; and
- encouraging their child to be allergy aware.

4.7. Parents/guardians of children with allergies

4.7.1. In addition to paragraph 4.6, the parents/guardians of children with allergies should:

- work with the School to fill out an individual Healthcare Plan and provide an accompanying Allergy Action Plan if available ;
- if applicable, provide the School or their child, with two labelled, in date, adrenaline devices;
- if applicable, provide the School with any other medication, for example antihistamine (with a dispenser, ie spoon or syringe), inhalers or creams; (RCS Only)
- ensure medication is in-date and replaced at the appropriate time;

- ensure their child has access to their allergy medication, including two adrenaline devices, if prescribed, on the journey to and from School;
- update the School with any changes to their child's conditions and ensure the relevant paperwork is updated too;
- as part of the admissions process, provide the School with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management; and
- support their child to understand their allergy diagnosis, advocate for themselves, and take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.

4.8. All pupils

4.8.1. All pupils at the School should:

- be allergy aware;
- understand the risks that allergens might pose to their peers and respect measures to support them;
- learn how they can support the wellbeing of their peers and be alert to allergy-related bullying.
- not tamper with or remove AAI devices from their boxes unless in an emergency
- older pupils (RS Only) should learn how to recognise an allergic reaction, and be able to support their peers and staff in case of an emergency.

4.9. Pupils with allergies

4.9.1. In addition to paragraph 4.8, pupils with allergies, as appropriate to their age and capability, are responsible for:

- knowing what their allergies are and how to mitigate personal risk and keep themselves safe;
- avoiding their allergen as best they can;
- understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- for RS Boarders only – if leaving the school site with permission during the school day, knowing what to do if they have an allergic reaction off the school premises, including how to treat themselves and how to raise the alarm to get help;
- carrying two AAI devices on their person at all times, if these have been prescribed. This includes when travelling to and from School on buses and

public transport and on educational or recreational visits, trips or holidays. Pupils will not be permitted to travel on a school trip without their medication.

- understanding how and when to use their adrenaline auto-injector and only using them for their intended purpose;
- understanding the importance of following the school-specific processes of lunch and snack services including identifying themselves to catering staff at the allergy counter or service point before being served any food or drink, or asking a member of the catering staff about allergens that may be present in any self-service dishes, such as salads, soup, bread and dessert before selecting them.
- talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy; (For younger pupils, this may mean speaking with their parents who should raise any concerns with the Designated Allergy Lead or class teachers on their behalf).
- raising concerns with any member of staff if they experience any appropriate behaviour in relation to their allergies.

5. Information and Documentation

5.1. Register of pupils and staff with an allergy

5.1.1. The School has a register of pupils and record of staff who have a diagnosed allergy. This includes children and staff who have a history of anaphylaxis or have been prescribed adrenaline devices, as well as pupils and staff with an allergy where no adrenaline devices have been prescribed.

5.2. Individual Healthcare Plans

5.2.1. Each pupil with an allergy requiring active management by the School has an Individual Healthcare Plan (IHP). The information on this plan includes:

- known allergens, risk factors for allergic reactions and any adaptations needed;
- a history of their allergic reactions
- if the pupil has asthma and any other medical conditions and necessary detail;
- details of the medication that the pupil has been prescribed, involving their dose, this should include the adrenaline devices, antihistamine etc;
- a copy of parental consent to administer medication, including the use of spare adrenaline devices in case of suspected anaphylaxis, and asthma inhalers;

- an indication of how the child's condition may impact on their learning or wellbeing;
- if the child is able to take responsibility for their condition including in an emergency;
- a photograph of each pupil and emergency contact details; and
- a copy of their Allergy and/or Asthma Plan.

6. Assessing Risk

6.1. Allergens can crop up in unexpected places. Staff (including vising staff, peripatetic staff, coaches, self-employed staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking;
- bringing animals into the School, for example a dog or hatching chick eggs can pose a risk;
- running activities or clubs where they might hand out snacks or food "treats". Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- planning special events, such as cultural days and celebrations, speech days, art exhibitions, or events involving FORS or the RCPTA.

6.2. Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, staff should adapt the activity. The School will ensure compliance with the Equality Act 2010.

7. Food, including mealtimes and snacks

7.1. Catering in School

7.1.1. The School is committed to providing safe and inclusive meals and snacks for all students, staff and visitors, including those with food allergies.

- due diligence is carried out with regard to allergen management when appointing catering contractors;
- all catering staff, and other school staff preparing food, will receive relevant and appropriate allergen awareness training via their employer;
- anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- the catering team will endeavour to get to know pupils with allergies and what their allergies are, supported by school staff;

- the catering team will endeavour to provide varied meal options to pupils and staff with allergies;
- the School has robust procedures in place to identify pupils with food allergies, these include:
    - ensuring that the Medical Centre Team (RS)/Office Manager (RCS) informs the catering manager (RS)/Head Chef (RCS) of pupils with food allergies, including providing them with an up-to-date photograph.
    - having allergen champions available at every food service, who are trained members of their team, who provide any special diets that may be required and support catering staff to identify pupils with allergens. Allergen Champions will be briefed daily on the allergens in the menus and posters will be displayed around the Dining Hall encouraging pupils who may have any questions about allergens, to come and ask any member of staff.
    - will serve all pupils with a known allergy from the allocated allergen counter, once the pupils have made themselves known to the catering team during service. Staff may also use the allocated allergen counter if they wish to. (RS only)
- dishes and menus containing the main 14 allergens (See Allergens definitions in paragraph 3.3 above) will be clearly labelled using full words, not symbols or abbreviations. Other ingredient information will be available on request. Symbols may be used in addition to words at RCS to support understanding for younger pupils, although staff will remain responsible for ensuring pupils with food allergies do not receive food containing these items
- information on allergens will be available for the pupil to check independently. (RS Only)
- pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging.
- where changes are made to the ingredients which involve the introduction of a known allergen this will be communicated to pupils with dietary needs by the Catering Manager.

7.2. Food bans and restrictions

7.2.1. The School is an Allergen Aware School. The School has pupils with a wide range of allergies to different foods. To minimise the risk to pupils and staff, pupils are not permitted to bring any food into School or onto School transport including school coaches and minibuses. Parents must not bring food into School to give to their children on school premises. Any food, such as birthday cakes, sweets etc, brought in by children to be shared with other children, must be placed in school bags and only consumed after leaving the premises. Parents are responsible for ensuring that any food given in this manner is safe for their child to consume.

7.2.2. Staff must carefully consider risks associated with bringing their own food onto site. This should usually be for their own consumption. Where food is for sharing, this must never be with pupils, only other adults in school. This food must be labelled with the 14 key allergens (see paragraph 3.3). If removed from it's original packaging, or if it is 'home made', staff must ensure that allergen information is clearly visible.

7.2.3. Staff should not provide pupils with food including sweets, biscuits and lollipops, without careful consideration of the risks that this presents. Staff must discuss any request to do this with the DAL such that an appropriate risk assessment can be carried out in order to ensure that this can be done safely.

7.2.4. Boarders at RS may bring food into the boarding house for their own consumption, however this must remain in its original packaging. Where boarders have food based allergies, parents of all boarders in that house are informed via email that items containing that allergen should not be brought into to boarding. Pupils have a termly briefing to ensure they do not bring relevant items in and boarding staff routinely remind boarders and conduct checks. The needs of all boarders are considered when making weekly shopping lists for boarders, ensuring that allergens are considered. Provision is made for pupils who require a modified diet. For example, for pupils who have coeliac disease and can therefore not have snacks containing gluten, a special stock of items is available.

7.2.5. Food may be received for boarding pupils, only if the delivery is received by the member of staff on duty, and the member of staff fully monitors the consumption of the food. This would involve the member of staff ensuring that no food leaves the room designated for the consumption of the food. Also, food must not be passed between boarding houses.

7.3. Food hygiene for pupils

- The School will encourage pupils to wash their hands with soap and warm water before and after eating or handling ingredients;
- Parents/guardians and pupils, will be advised that water bottles should be clearly labelled and food should not be shared or swapped;
- In Boarding Houses, where pupils are able to prepare, cook and/or consume their own food, basic food hygiene is taught by boarding staff. Separate fridges are provided for the safe storage of halal products.
- In Food Tech teaching spaces (RCS Only) the following measures are taken to protect pupils:
    - use of ingredients on the allergen list are minimised (no sesame, soya, nuts)

- allergen free ingredients are used by those with identified allergies (e.g. wheat flour is not used by those with coeliac disease – a gluten free alternative is provided) and/or alternative recipes are used
- ingredients for each pupil/pair of pupils, are laid out separately by the teacher before the lesson and a separate cupboard is used to store equipment used by pupils with allergies
- pupils are not allowed to share ingredients, taste food during the lesson or eat finished products on the school site

8. Educational Visits, Recreational trips and Sports Fixtures

- Staff leading the trip (the trip leader) must obtain a list of pupils with allergies and details of their medication from SIMS(RS)/SchoolBase(RCS). Staff should notify the trip leader if they themselves have any allergies;
- Allergies will be considered on the risk assessment and catering provision put in place;
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- All Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction;
- Allergens will be clearly displayed when the School provides snack teas and match teas. Food allergy information sent by other schools to School staff must be shared with Sodexo to ensure appropriate food can be provided for visiting pupils.
- Allergens will be clearly labelled on catered packed lunches. Packed lunches must be booked in advance with the catering team ensuring pupils with all food-related allergies are highlighted to catering staff via the designated hospitality booking system. Staff are responsible for checking the packed lunches are correctly labelled and named before giving them to pupils.
- When off-site catering facilities are being used for a day or residential trip, medical/allergy information will be passed on to the relevant catering personnel/trip provider/accommodation by the trip leader. Staff will confirm that food provided to pupils by an off-site provider carries the appropriate allergen labelling before it is provided to pupils. On trips where pupils are allowed to purchase their own food, they should be encouraged to use reputable establishments and to ensure that they make servers aware of any allergies before ordering.
- If attending a 'Match Tea' at another school, RS/RCS School staff remain responsible for checking food provided meets the requirements sent ahead before any food or drink is given to the pupil. Staff should accompany pupils to collect food or drink at an away fixture, inform serving staff that they have pupils with

allergies visiting their school and confirm the allergy information made available to pupils.

8.2. RS – First Aid and allergy management provision for all offsite activities must be in accordance with the minimum requirements of the First Aid & Allergy Needs Assessment for Offsite Activities (available to staff via FireFly).

8.3. RCS – At least one member of staff on any offsite activity must have completed Full Paediatric First Aid training which includes anaphylaxis training.

8.4. First Aid and allergy management support for School Events will be in accordance with the Risk Assessment for each individual event.

8.5. Staff must not allow any pupils to travel where required medication is not available or insufficient in quantity to complete the trip.

9. Events

9.1. If the School hosts any events (including those run by FORS/RCPTA) it is important that no food poses a risk to the end user; however, this is difficult for the Catering Department to monitor. Where products are not made on site, and are not pre-packaged by a third party, but sold by the School (including by FORS/RCPTA), appropriate signage, that states the following, should be in place:

This item was not produced at Reed's School/Ripley Court School therefore the School cannot guarantee that it does not contain nuts or any other allergen.

9.2. All products should be plated separately and stored as such to prevent cross contamination to other items for sale.

9.3. It should be left to the discretion of the person buying the food that they accept the risk that allergens may be present.

9.4. Where food is produced off site (e.g. home bakes) the maker is responsible for the labelling of allergens as listed in paragraph 3.3

9.5. Where School facilities are hired by an external party and the School does not provide any refreshments, the hirer is solely responsible for ensuring that all legal requirements are met regarding food safety.

10. On site Café's and other food provision (RS Only)

10.1. The School Shop, Tuck Shop, The Jarrett Indoor Cricket Centre Café, Mobile Tuck Shop and Sixth Form Café procure many items that are available to the pupils to buy. All the items that are individually wrapped will carry their own labels on the branded packaging. Where items are not pre-packaged, (e.g. ice-creams) allergy information will be clearly displayed.

11. Insect Stings

11.1. Those with a known insect venom allergy should:

- avoid walking around in bare feet or sandals when outside and when possible keep arms and legs covered.
- avoid wearing strong perfumes, aftershaves, body sprays or cosmetics; and
- keep food and drink covered.

11.2. The Grounds, Gardening and Caretaking staff will monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the School grounds and avoid the area.

12. Animals

12.1. It's normally the dander (flakes of skin), saliva, or urine, that causes a person with an animal allergy to react. Precautions to limit the risk of an allergic reaction include:

- a pupil with a known animal allergy should avoid the animal to which they are allergic;
- if an animal comes on site, a risk assessment will be completed prior to the visit;
- animals who regularly come on site (such as Therapy Dogs) will have their own risk assessment, written by the person organising the event/activity, which will include mitigations to protect those with allergies;
- areas visited by animals will be cleaned thoroughly;
- anyone in contact with an animal will wash their hands after contact'
- if an animal lives on site, for example in a Boarding House, pupils, parents and staff will be made aware and consideration and adaptations will be made; and
- school trips that include visits to animals will be carefully risk assessed.

13. Allergic Rhinitis/Hay Fever

13.1. Details regarding allergic rhinitis/hay fever can be found in the Medical Conditions Policy.

14. Inclusion and Mental Health

14.1. Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- staff are alert to the possibility of allergy-related bullying and are proactive in safeguarding the wellbeing and inclusion of pupils with allergies (see Anti-Bullying Policy);
- no child should be excluded from taking part in a school activity, whether on the School premises or on a School trip because of their allergies. However, pupils who have a prescribed AAI but fail to have this with them will be prevented from travelling offsite including on School trips and to matches.
- pupils with allergies may require additional pastoral support including regular check-ins from their Tutor, Head of House, Boarding Staff, or other members of the Pastoral team;
- affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives;
- bullying related to allergy will be treated in line with the School's Anti-Bullying Policy; and
- uniform policies take into account that children may need emergency medication near them at all times.

15. Adrenaline Devices

15.1. Storage of adrenaline devices

- pupils prescribed with adrenaline devices will have prompt access to two, in-date devices at all times. Depending on their age and maturity, pupils should carry these with them at all times. Alternatively, they should be carried by the accompanying staff member. During sporting activities, these may be left pitchside, or carried in the Rescue Boat during Sailing, for example.
- spot checks will be made to ensure that pupils are carrying their prescribed adrenaline devices and that they are in date;
- spot checks will be made to ensure that adrenaline devices are where they should be, have not been tampered with, and that they are in date;
- adrenaline devices should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator); and
- used or out of date devices should be disposed of as sharps.

15.2. Spare adrenaline devices

15.2.1. Reed's School has 10 pairs of spare adrenaline devices to be used in accordance with government guidance. These are located in:

Assembly Hall Front Office Common Room Medical Centre Winterflood Medical Room Dining Room	PE Office Day Pupil centre 6th Form Boarding, Middle School Boarding The Close Boarding

15.2.2. Ripley Court School has 3 pairs of spare adrenaline devices to be used in accordance with government guidance. These are located in:

Medical Room	Dining Room	Little Court

15.2.3. The Designated Allergy Lead and Medical Centre Manager(RS)/Office Manager (RCS), are responsible for:

- deciding how many spare devices are required
- what dosage is required, based on the Resuscitation Council UK's age-based guidance
- which brand(s) to buy. Generally they will aim to stock a single brand with long expiry dates.
- the purchasing of spare adrenaline devices; and
- distribution around the School site and clear signage.

15.3. **Adrenaline devices on off-site activities**

- No child with a prescribed adrenaline device will be able to take part in any off-site activity, including school trips, without two of their own devices. It is the trip leader's responsibility to check the pupil has them.
- Adrenaline devices will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling, or left in changing rooms;
- Adrenaline devices will be protected from extreme temperatures;
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and

- Consider whether to take spare adrenaline devices to off-site activities. Consult the Offsite Activities First Aid & Allergy Needs Assessment for Offsite Activities document for guidance (available via FireFly (RS)/Staff Sharepoint site (RCS). This should be recorded as part of the activity/trip risk assessment.

15.3.1. Staff should also read the "Educational, Holiday and Recreational Trips Policy" (Reeds), and/or the "External Visits Policy" (RCS) which contain supplementary information relating to offsite activities.

16. Responding to an allergic reaction/anaphylaxis

16.1. All staff have been trained in how to recognise and respond to anaphylaxis. In all cases:

- a pupil with a known allergy should be treated in accordance with their Allergy Action Plan and/or IHP.
- if anaphylaxis is suspected, adrenaline should be administered without delay and contact made immediately with emergency services stating "Anaphylaxis"; there is no need to wait for a member of staff to arrive. Adrenaline can be given using the School's spare device if needed, or a device available at the location. The Medical Centre (RS), or Reception (RCS), must be contacted immediately.
- anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany the pupil in an ambulance until a parent/guardian arrives.

16.2. Depending on the circumstances, it may be necessary to instigate the School's Critical Incident Plan.

17. Training

17.1. The School is committed to ensuring that all staff receive regular (at least annual) allergy awareness training. This training should cover all staff, including teaching staff, support staff, part-time staff and those who may oversee children at breakfast and after-school clubs.

17.2. This training will cover:

- understanding what an allergy is;
- how to reduce the risk of an allergic reaction occurring;
- how to recognise and treat an allergic reaction, including anaphylaxis;
- how to treat an asthma attack using a reliever inhaler;
- how the School manages allergy, for example understanding the School's Allergy Safety Policy, emergency response, documentation, communication, etc;

- how to check who has an allergy, and how to use an IHP and Allergy or Asthma Action Plan;
- where adrenaline devices are kept (both prescribed devices and spare devices) and how to access them;
- the importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy-related bullying;
- understanding food labelling;
- how to report an allergic reaction or near miss; and
- taking part in an anaphylaxis drill.

17.3. The School will carry out an anaphylaxis drill once a year. This involves an exercise simulating an event where a pupil or member of staff has an allergic reaction and testing the whole school response.

18. Asthma

18.1. The School understands that it is vital that pupils with allergies keep their asthma well controlled. Asthma can exacerbate allergic reactions and poorly managed asthma increases the severity of an allergic reaction.

- staff will be aware of common asthma triggers which may include airborne allergens such as pollen, house dust mite, mould spores or pet dander and food allergens.

- all pupils with asthma will have an Asthma Action Plan. Where relevant, an Asthma Action Plan will be in addition to an Allergy Action Plan.

- the Asthma Action Plan will be included in the pupil's IHP, and will include medical and parental consent for staff to administer medicines, including an emergency reliever inhaler in the event of an asthma attack.

- pupils known to have asthma should have their own reliever inhaler at school at all times, and on the journey to and from school.

- where a pupil is able to manage their asthma themselves, they should keep their inhaler with them. If they cannot, it should be stored in a clearly labelled, easily accessible location.

- the School holds a number of spare emergency inhalers. These are kept in the Front Office, Sixth Form Boarding Office, Matron's School House Matron's Office, The Close Matron's Office, Winterflood Medical Room, Sports Hall Foyer, DPC Office at Reed's and in the Medical Room and Dining Room at Ripley Court.

19. Reporting Allergic Reactions

19.1. The School will log all allergic reaction incidents and near-misses as soon as feasible after they occur.

- each record should include: Who was affected, what happened when and where, why the incident occurred (as far as known), how staff and pupil(s) responded; what was done to support the individual; whether emergency services were called and how the incident concluded.
- incidents should be recorded at RS using either the Pupil Accident Form or Staff Accident Form (available via FireFly Medical Centre — Reed's School Firefly)
- incidents should be recorded at RCS in SchoolBase – please see Office Manager for support.
- near Misses should be recorded in the respective school's Near Miss Logs.
- all incident reports should be shared with the pupil's parents/guardians, who will be given the opportunity to discuss the incident and contribute their views to the review;
- all incident reports should be shared with the Designated Allergy Lead, Allergy Governor, and the Governing Body, so they can consider what lessons to learn and whether policy/procedure changes are required.
- any learning from an incident should be shared appropriately with staff so they can act on it.
- it may be necessary to share the report with other agencies. For example, incidents arising directly from a work activity that result in death or immediate hospitalisation must be reported to the Health and Safety Executive under RIDDOR. Please refer to the Health & Safety Policy for further details of who is authorised to make reports to RIDDOR on behalf of the School.
- following any incident or near miss the School will meet with the pupil and their parents/guardians to ensure they are confident the setting remains safe.
- the School recognises the impact of an incident or near miss, not just on the individual and their family, but also on staff who responded and others who witnessed it, and will offer appropriate support.

Compiled by: Medical Centre Manager (RS), Designated Allergy Leads, Compliance Manager & Receptionists (RCS)	**Revision Number:** 7 (Autumn Term 2026)
Approved by: RS Pastoral Committee	**Next Revision date:** Autumn Term 2027

Revision History Table

Revision Number	Section/Paragraph number	Amendments
7 – Autumn 2026		Replaces “Food Allergy Policy”. Whole policy completely rewritten.