St. John's Church of England VA Primary School

Allergy Safety Policy

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Shining Bright Together As One Family

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1. St. John's Christian Vision and Values

We have high aspirations and expectations for all our pupils, aiming to provide a safe and secure environment in which everyone can flourish and grow as God's children. Working together with parents and carers, we are building strong relationships, enabling us to 'Shine Bright Together as One Family.'

This reflects our Christian vision and associated values, where every member of our school community – pupils, parents, staff and governors – has a role to play in ensuring every person thrives. Our vision is based on the words of Jesus written in Matthew chapter 5 verse 16:

> "In the same way, let your light shine before others,
> that they may see your good deeds and glorify your Father who is in heaven."

The desire at St. John's is for every person to shine their own light brightly, whether it be through academic ability, sport, music, art or personal interest outside of school. Everyone is important and special: a unique masterpiece in the eyes of God.

We also feel it is important that we are never truly alone. At St. John's, we stand together with each other, supporting and helping, celebrating and comforting. We are one school, church and community family, doing life together.

There are four core Christian values which are particularly important in the life of our school:

- Forgiveness
- Friendship
- Respect
- Perseverance

2. Aims

St. John's CE Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. As part of that, school is committed to providing a safe, inclusive and supportive environment for pupils with allergies. This commitment also extends to staff and visitors with allergies. We recognise that a whole-school approach and effective management are essential for the health and wellbeing of those with allergies within our school community.

This policy complements the principles of school's Supporting Pupils with Medical Conditions policy and sets out how our school will fulfil its statutory duties in relation to allergy safety. The policy will also share the recommended good practice our school will adopt to coincide with legislative requirements.

This policy aims to:

- ✓ Clarify our whole-school approach to allergy safety
- ✓ Share the principles of how the school will reduce the risk of exposure to allergens for those within the school community with allergies
- ✓ Outline the procedures in place in case of allergic reaction
- ✓ Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- ✓ Aid the promotion of allergy awareness amongst the school community

3. Legislation and Guidance

This policy has been developed with regard to the following key documents:

- DfE Allergy safety in schools - GOV.UK, 2026
- DfE Supporting pupils with medical conditions at school - GOV.UK, 2014 (last updated 2017)
- Health and Safety at Work etc. Act 1974

St. John's CE Primary School will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all reasonable efforts to comply.

4. Role and Responsibilities

The roles and responsibilities across the school community are outlined below:

4.1 Governing Body

The governing body of the school will ensure that:

- A statutory allergy safety policy is in place and is reviewed at least annually, or when an incident or 'near miss' occurs.
- An Allergy Safety Lead has been appointed from the senior leadership school staff.
- An Allergy Safety Lead has been allocated from the members of the governing body.
- Appropriate resources are available for training and the purchase of emergency medication.
- Risks relating to allergy are included within the school's risk management arrangements.
- Allergy-related incidents and 'near misses' are recorded, reported and reflected upon.

4.2 Headteacher

The Headteacher will:

- Ensure the Allergy Safety Policy is implemented effectively.
- Ensure appropriate staffing, training and resources are available.
- Determine whether pupils require an Individual Healthcare Plan (IHP).
- Allocate staff who will support the Allergy Safety Lead with the ordering, storage, maintenance and disposal of allergy-related medication
- Support the Allergy Safety Lead in fulfilling their duties.

4.3 Allergy Lead

The school's nominated Allergy Safety Lead is: Victoria Postle

The Allergy Safety Lead will:

- Oversee the implementation of this policy.
- Coordinate the annual review of the policy, or a review following a serious incident or 'near miss'.
- Ensure the allergy safety policy is readily available to the school community and published on the school website.
- Maintain an up-to-date allergy register.
- Ensure pupils with an allergy IHP have their IHP reviewed at least annually, or sooner should their condition change or an incident or 'near miss' occurs.
- Coordinate processes for ensuring all pupils with allergy medication have their medication available in school.
- Coordinate processes to ensure pupils with an allergy action/care plan have their latest plan available in school.
- Ensure information relating to people with allergies is shared appropriately and regularly across the school community as required.
- Ensure robust staff training is completed and that this training is repeated annually.
- Ensure the school has a supply of dummy trainer AAIs for training, and that these training devices are stored and labelled to ensure there is no confusion in an allergy emergency.
- Coordinate the procedures for ensuring the expiry date checks of both prescribed and "spare" adrenaline auto-injectors (AAIs) happens at least half termly and that replacements are obtained in a timely manner.
- Coordinate procedures for the safe return or disposal of unused AAIs.

- Liaise with pupils, parents and carers, healthcare professionals, catering providers and staff where needed.
- Support the recording, reporting and reflection following allergy incidents and 'near misses'.
- Promote allergy awareness and awareness of school policies and procedures relating to allergies across the school community.

4.4 Allergy Support Roles

These staff roles need to be considered and allocated to ensure the below are actioned in a timely manner. The staff are responsible for the following in relation to allergy safety:

- Carrying out half termly checks of the expiry dates of any prescribed or "spare" AAIs.
- Ensuring parents and carers are contacted in a timely manner where prescribed replacement AAIs are required for pupils with allergies. This may be at the start of term, or when AAIs have been used in school, or when prescribed AAIs are close to expiry.
- Ensuring replacement "spare" AAIs are ordered for purchase when expiry dates approach or "spares" have been used.
- Ensuring unused AAI are safely returned to parents and carers or disposed of to a pharmacy.

4.5 School Staff

All staff will:

- Ensure they have read and understood the Allergy Safety policy.
- Engage with all aspects of allergy awareness training.
- Ensure they are familiar with the school emergency response procedures.
- Ensure they familiarise themselves with the allergy register that is regularly shared by the Allergy Safety Lead.
- Support the Allergy Safety Lead in increasing allergy awareness across the school community.
- Support the school to ensure the wellbeing and inclusion of pupils with allergies.
- Take reasonable steps to support the school in minimising risks of allergen exposure.
- Feel confident in recognising the signs of allergic reactions and anaphylaxis.
- Respond promptly in allergy emergencies, considering the planned school emergency response procedures as far as possible.
- Report incidents and 'near misses' relating to allergies and support any subsequent investigation.

4.6 Parents and Carers

Parents and carers are responsible for:

- Informing the school of any allergies.
- Supporting the school to develop an IHP if it is deemed necessary, then engaging with the annual review of that IHP.
- Providing medical information and action/care plans for allergies where available.
- Providing medication that is 'in date' for their child where required.

- Supporting the school by replacing any medication for their child in a timely manner when it has been used or is close to expiry.
- Notifying the school when there are changes in their child's medical needs.
- Being aware of the school allergy safety policy.
- Working in partnership with the school to reduce risks of exposure to allergens across the school community.

4.7 Pupils with allergies

Where age and understanding allows, these pupils are expected to:

- Understand their allergy and known triggers.
- Follow their healthcare arrangements.
- Know where to seek help.
- Carry their prescribed medication where it is agreed with parents and carers and school.
- Avoid sharing food and drink if this could pose an allergen exposure risk.

4.8 Pupils without allergies

Where age and understanding allows, these pupils are expected to:

- Be allergy aware and follow school advice to minimise risk to their school community.
- Avoid sharing food and drink if this could pose an allergen exposure risk.

5. Identification of Members of the School Community with Allergies

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Asthma, food allergy, eczema and seasonal rhinitis (hay fever) are all forms of allergy. Some children and young people have medically recognised sensitivities or triggers which may not meet the clinical definition of allergy.

Food intolerance is a non-immune system reaction where the body struggles to digest specific foods, causing symptoms like abdominal pain, bloating and diarrhoea for hours or days after eating. Unlike food allergies, intolerances cannot cause anaphylaxis. They are usually managed by identifying specific triggers, for example lactose intolerance or non-coeliac gluten sensitivity
Allergy safety in schools - GOV.UK.

School will work with pupils, parents and carers and any healthcare professionals involved utilising the principles of the Allergy Safety policy in order to determine the correct support for any pupil with allergies. The school will support those conditions that do not meet the clinical definition of allergy through our Supporting Pupils with Medical Conditions policy, rather than our Allergy Safety policy.

School will endeavour to maintain an accurate record of individuals with known allergies, including pupils, staff and, where appropriate regular visitors. Our school will also try to support the needs of other visitors who are on school premises.

5.1 Identification of Pupils with Allergies

Information will be collected through the following methods:

- Pupil admission and data collection paperwork
- Annual data collection updates/reviews of IHPs if pupils have one
- Information shared from previous educational settings
- Discussions with parents and carers
- Information shared from healthcare professionals

The school will maintain an allergy/medical register for pupils which will be shared with relevant staff regularly. The allergy /medical register will be kept in main office and will include:

- Known allergens
- Medication prescribed
- Usual location of medication and/or if pupil carries it themself
- Whether the pupil has a medical/care/action plan provided by a healthcare professional

In addition, the school gains individual parental consent to display photographs of pupils with severe, life-threatening allergies on paperwork/in locations that may assist staff as reminders of those who staff need to be allergy aware.

5.2 Identification of Staff with Allergies

Information will be collected through the following methods:

- Staff health declarations
- Discussions with individual staff

School will sensitively discuss with the staff member whether they are comfortable for their allergy information to be shared with colleagues. The school and the staff member will then decide together on preferred emergency procedures, where medication should be located and whether/how colleagues would be able to support in an emergency for that staff member. If appropriate, school will develop a staff allergy register or other mechanism for sharing staff allergy information with consent.

5.3 Identification of Visitors with Allergies

Information will be collected through the following methods:

- Visitor sign in systems
- Pre-visit email/conversations in advance where visits are planned

6. Individual Healthcare Plan (IHPs)

Children and young people should have an Individual Healthcare Plan (IHP) if:

• they have an allergy which has a functional impact on them in their school, college or setting;
• they are at risk of harm as a result of their allergy ***and***
• they require arrangements which are additional to or different from those made generally.
Allergy safety in schools statutory guidance

The Headteacher will consider all information provided to decide if an IHP is required, and a formal diagnosis is not required in order for an IHP to be developed. The IHP will establish the arrangements that our school will put in place that or different from or additional to those offered generally.

An IHP will be:

- Developed with parents and carers, the pupil (where appropriate) and relevant professionals where available.
- Reviewed annually, or when the condition changes, or there is a serious incident or 'near miss'.
- Include appendix documents such as medical/care/action plans from healthcare professionals where available.

The IHP for allergy will generally include:

- Details of the allergy
- Known triggers
- Preventative measures
- Medication requirements
- Emergency arrangements
- Impact upon learning, wellbeing and attendance
- Consider arrangements for visits and off-site activities
- Reference to any medical/care/action plans
- Details of any other medical conditions should the pupil have more than one medical condition (a pupil will only have one combined IHP for school)

An IHP will be shared with the new school or college as part of transition, should the pupil move settings.

7. Risk Management

7.1 Assessing Risk

School will conduct risk assessments for any pupil at risk of anaphylaxis. This includes, but is not limited to activities such as:

- Food technology/activities involving food
- Science
- Music
- Art and crafts
- Animal encounters
- Outdoor activities
- Off-site activities, events and school trips
- Special events/celebrations

No pupil will be excluded from activities due to their allergies, and reasonable adjustments will be considered to enable safe participation wherever possible.

7.2 Minimising Risk

School will take reasonable steps to minimise exposure to known allergens whilst maintaining an inclusive environment. Staff planning activities will consider allergy risks in advance and may include the following:

a) Hygiene Controls
    - Promoting handwashing before and after handling/consuming food
    - Education around the risks of food, drink and utensil sharing
    - Encourage clear labelling of water bottles and lunchboxes
    - Tables cleaned thoroughly after eating
b) Food Allergy Controls
    - School will work closely with catering providers, parents and carers and pupils to information share in order for individual allergies to be clearly understood
    - Where appropriate, school will work with caterers to offer families an opportunity to meet catering teams and view catering facilities
    - School will work closely with caterers to ensure school menus and allergen information are available promptly for parents and carers and pupils
    - School will work closely to reassure parents and carers and pupils that risks have been minimised and cross-contamination avoided
    - Where food is provided by school staff who are not part of catering teams, the staff will understand the pupil's allergies and will understand how to read labels for food allergens.
c) Airborne and Contact Allergy Control
    - Seating arrangements will be considered where appropriate
    - Classroom resource hygiene will be considered where appropriate
    - Risks will be assessed and managed individually where animals must be considered
    - Alternative resources may be sourced to ensure the inclusion of all pupils in activities
d) Visit and Trip Controls
    - Individual risk management may be required for visits and trips
    - Visit/trip venues will be contacted in advance to discuss allergies and how risks can be managed

- Visits and Trips will be discussed further in section 10 of the policy

8. Handling Allergic Reactions

School will ensure staff feel prepared to support with an allergic reaction. To do this effectively the school has put in place the following as part of its policy:

- ✓ Staff are trained at least annually in recognising the signs of both mild and severe allergic reactions and anaphylaxis.
- ✓ Staff are trained in how to use an adrenaline auto-injector (AAI).
- ✓ Staff are aware that pupils may have an allergy action plan to follow.
- ✓ Staff are aware that pupils may have prescribed adrenaline which must be administered within 5 minutes.
- ✓ Staff are aware of where the "spare" adrenaline is located within school (if needed).
- ✓ Staff will contact emergency services if anaphylaxis occurs (or another situation arises) and will then contact parents and carers to notify them.

9. Emergency Medication for Allergies

Medication for allergies on site may include the following:

- ➢ Prescribed antihistamine for a pupil with known allergies
- ➢ Prescribed adrenaline auto-injectors (AAI)for a pupil with known allergies
- ➢ Prescribed nasal adrenaline for a pupil with known allergies
- ➢ Prescribed salbutamol inhalers for a pupil with known asthma and/or allergies
- ➢ School supply of antihistamine
- ➢ School "spare" supply of adrenaline auto-injectors (AAI)
- ➢ School "spare" salbutamol inhalers

Key principles across school for all emergency medication are that they must not be locked away, must be clearly labelled and must be no more than 5 minutes away from any individual who may need them. The medication must be stored away from direct heat sources such as radiators, or direct sunlight. All staff should be able to determine the locations of prescribed emergency medication via the allergy register. All staff should know the location of the school supply of medication.

9.1 Prescribed Adrenaline Devices (ADs)

Pupils in school may be prescribed two nasal adrenaline or adrenaline auto-injectors (AAIs) and these are collectively known as adrenaline devices (ADs). Pupils who are prescribed adrenaline must know where their ADs are at all times. They must have access to a pair of devices at all times and be no more than 5 minutes away from their medication. The devices must not be locked away at any time and must be clearly labelled for the pupil. A copy of the pupils' allergy action plan will be kept alongside their medication. When developing the IHP it must be decided whether the pupil is

competent to carry their own AD, as they should be carried on them at all times if possible. This will be discussed regularly as part of conversations around preparation for adulthood within the IHP discussions.

Pupils who will carry their own AD will discuss with school where they will be kept throughout the day. Pupils with work with school to consider the different aspects of the day such as movement around school and accessing outdoor environments or being prepared for an evacuation.

When discussing access to ADs with pupils, parents and carers the following may need to be considered:

- Prescribers may only prescribe the child with a total of two ADs. This would mean a plan for transportation to and from school and assurance that they are on the premises each day may need to be considered.
- Prescribers may prescribe four ADs, and this may mean two AD can be left in school overnight and two remain at home. A plan for the pupil having access to ADs on their journey to and from school must be considered, as well as agreeing whether the ADs would arrive and be sent home each term.

If pupils cannot carry their own AD, then school will work with parents and carers and the pupil to consider where the AD could be stored and who would take responsibility for their movement around school or outdoors if needed. This will include access across the whole school site and in the event of an evacuation. Specific plans for visits and trips may need to be discussed as soon as they are arranged.

Pupils with allergies may also be prescribed salbutamol. It is important that the storage and access for this emergency medication is also considered as part of plans for the pupil.

The staff who check the expiry dates of all medicines kept in school will also check the expiry dates of those left on site that are prescribed to pupils. These will be checked on a half-termly basis as part of the medication check processes. Requests to parents and carers for new supplies will be sent out in a timely manner and arrangements will be made for expiring devices to be sent home as new supplies arrive.

9.2 “Spare” Adrenaline Devices

School has purchased “spare” adrenaline auto-injectors (AAIs) and these are stored in case of emergency anaphylaxis. The school “spare” AAIs can be used without prior consent on individuals who are prescribed ADs and they are not available, not working or expired. The school “spare” AAIs can also be used without prior consent for individuals who do not have a diagnosis of allergies and appear to be showing their first signs of anaphylaxis.

School have considered the school site and the population of the school and have decided to purchase the following:

AAIs for individuals under age 6 years (150 micrograms)	AAIs for individuals over 6 years of age (300 micrograms)
Two “spare” AAIs	Two “spare” AAIs

The AAIs will be labelled as “spares” and located in the following areas of the school:

AAI devices	Location in school
Two 150mg dosage	Located in medicine cabinet in medical room at entrance
Two pair 300mg dosage	Located in medicine cabinet in medical room at entrance

The staff who check the expiry dates of all medicines kept in school will also check the expiry dates of the “spare” AAI on site. These will be checked on a half-termly basis. Staff will place orders for new AAIs and arrange for the disposal of those that have expired.

9.3 “Spare” Salbutamol Devices

School has purchased “spare” salbutamol inhalers and stores them in case of emergency. The school “spare” salbutamol can only be used by pupils who have a diagnosis of asthma and/or have been prescribed a reliever inhaler. The “spare” would be used where the pupils’ own reliever inhaler was empty, unavailable or not in school. Prior written consent must be gained from parents and carers for use. The school “spare” salbutamol inhaler cannot be used by a pupil showing their first signs of asthma.

School have considered the school site and the population of the school and have decided to purchase the following:

“spare” Salbutamol Reliever Inhalers	Spacers
1 salbutamol reliever inhalers	2 plastic spacers

The “spare” salbutamol inhalers will be labelled as “spares” and located in the following areas of the school:

“spare” Salbutamol Reliever Inhalers	Location in school
One salbutamol inhaler	Located in the medical cabinet in the medical room at the entrance of school
2 plastic spacers	Located in the medical cabinet in the medical room at the entrance of school

The staff who check the expiry dates of all medicines kept in school will also check the expiry dates of the “spare” salbutamol inhalers on site and ensure there is also a supply of spacers. These will be checked on a half-termly basis. Staff will place orders for new salbutamol inhalers and/or spacers and arrange for the disposal of those that have expired.

9.4 Disposal of Medicines

School will contact parents and carers if there are expired prescribed AAIs, antihistamine or salbutamol inhalers that remain on site. If our school has exhausted attempts for parents and carers to collect prescribed medication, then it may dispose of them via the pharmacy and gain a proof of receipt. School will dispose of school “spare” expired AAIs and salbutamol inhalers through the pharmacy where they were purchased if possible.

If an AAI has been used in an emergency, it will be given to the emergency services when they arrive at the school.

10. Visits and Trips

School will ensure that pupils with allergies are safely included on visits and trips. Risk management will carefully consider any additional allergen risks that may arise with off-site visits and activities, including food brought for visits and trips. School will contact any venues in advance where possible to discuss potential allergens and how the venue may support the school to minimise risk. Staff may work with parents and carers to discuss methods they have used to reduce risk when on visits and trips.

Staff will have appropriate allergy and anaphylaxis training and all staff on the trip will be made aware of any individuals with allergies.

Where pupils have their own allergy medication and allergy action plans, these will be taken on school trips. It will be decided beforehand who will take responsibility for storing the medication during the trip. Where appropriate the pupil will carry their own emergency medication.

School will consider carefully whether any “spare” AAI or “spare” salbutamol inhalers will be taken on individual school trips or visits. However, there is no legal obligation to take “spares”, and the priority must always be the school site as this must not be left ‘lacking in resource’.

Any AAI or salbutamol inhalers being taken on school trips or visits will have their expiry dates re-checked in advance of the trip.

11. Allergy Awareness

School will become an ‘Allergy Aware’ school where the culture of the school is for the whole school community to be knowledgeable about allergies, considerate of those individuals with allergies and reflect upon how to minimise risks of exposure to allergens. Allergy awareness will be considered for each group from across the school community.

11.1 Allergy Aware Staff

School will ensure that all staff due to be present during times when pupils are expected to be on site will access allergy awareness training. This will include temporary and supply staff.

School has developed a robust training programme for staff which includes the following:

I. Certified allergy awareness training via a reputable provider – this will include understanding allergies, recognising allergic reactions and anaphylaxis.
II. Practical training using a dummy trainer AAI and utilising the relevant branded training video
III. Emergency response drills/scenarios annually.
IV. Regular staff briefings to share school specific information including the allergy/medical register, update on aspects of policy, procedures, risk management and incident reporting. These briefings will also be an opportunity to share information and findings from emergency drills or incidents and 'near misses'.

New staff will receive the school allergy awareness training programme before working with pupils unsupervised. School will ensure that any temporary or supply staff who are employed by the school have accessed allergy awareness training before they begin their contract. This will be externally verified.

School is aware that staff may visit the school to work with pupils for short periods of time such as peripatetic staff. School will ask for evidence of allergy awareness training when these visiting staff attend. If staff do not have allergy awareness training the school will address this with the organisation providing the staff, in order to encourage their support of being allergy aware across the whole school.

11.2 Allergy Aware Pupils

School will include allergy awareness as part of the school curriculum. The education will be developed age-appropriately to ensure pupils have an understanding of allergies and how everyone can support the minimisation of risk.

10.3 Allergy Aware Parents and Carers

School will publish the Allergy Safety Policy on the school website and highlight to parents and carers. Updates relating to allergies and the minimisation risk measures will be shared as necessary. School will ensure that parents and carers are allergy aware when considering food and treats being brought onto school site or taken on school trips and visits.

12. 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.

School adopts a no-blame approach when allergy-related incidents or 'near misses' occur, and staff will be focused upon learning and continuous improvement.

12.1 Incident Recording

All serious incidents and 'near misses' will be recorded as soon as possible in accordance with school procedures and will include:

- 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

12.2 Incident Reporting

All serious incidents and 'near misses' will be reported in accordance with school procedures. The following may need to be informed:

- Parents and carers of children up to 16 years (permission required from a child after 16).
- School Health and Safety Advisory team
- School governing body.
- Health and Safety Executive if required.
- Local Authority Environmental Health if required.
- Relevant healthcare professionals if required.

12.3 Incident Reflection

The Allergy Safety Lead and Allergy Governor will sensitively review and reflect upon incidents alongside any relevant staff, the pupil or parents and carers to determine:

- Lessons learned.
- Additional training requirements.
- Amendments Individual Healthcare Plans.
- Policy/procedure improvements.

12.4 Subsequent Actions

- The IHP of any pupil involved should be reviewed alongside parents and carers and the pupil where appropriate.
- The school policy and procedures should be reflected upon.
- Lessons learnt should consider what went well and what could be improved.
- Healthcare professionals may review a child's allergy action plan and share updated copies.
- Staff should be briefed on key findings and changes that have arisen following the incident and reflection.

13. Wellbeing

The school recognises that allergies may affect confidence, wellbeing and emotional health.

The school will:

- Promote an inclusive culture.
- Provide reassurance to members of the school community with allergies regarding allergy risk management arrangements.
- Ensure pupils with allergies can participate fully in school life.
- Offer pastoral support and check-ins to pupils with allergies where needed.
- Work closely with families to learn from their experiences and reduce anxiety.

Preventing Bullying

Bullying relating to allergies will not be tolerated.

This includes:

- Excluding pupils because of allergies.
- Threats involving allergens.
- Deliberate exposure to allergens.
- Teasing or intimidation.

Bullying incidents will be managed through the school's behaviour policy.

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 provide wellbeing support to those involved. The school will support staff involved in any incident or ‘near miss’.

14. Information Sharing

Information relating to a person's allergy is special category personal data under UK GDPR.

School will:

- Store information securely.
- Share information on a need-to-know basis.
- Respect confidentiality.
- Ensure relevant staff have access to information necessary to keep individuals safe.

15. Monitoring Arrangements

This policy will be monitored at least annually by the Allergy Safety Lead and Head Teacher. It will also be overseen by the Allergy Safety Governor and the governing body where necessary. The policy will be reviewed sooner than annually if there is a serious incident or 'near miss'.

16. Links to Other Policies

This policy links to the following school policies:

- ✓ Supporting Pupils with Medical Conditions policy
- ✓ Health and Safety policy
- ✓ Data Protection policy
- ✓ Behaviour Policy