



Allergy Awareness & Safety Policy

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Version Control Table

Version	Date	Amended by	Rationale
0.1	10/09/2026	Gloria Gold	First draft of new policy
1.0	17/09/2026		The version approved by the Board

Guidance on Version Control:

The above is an example of how to complete the Version Control table.

Versions are 0.1, 0.2, etc. until such time as the document is approved. Then it becomes version 1.0.

Subsequent edited versions become 1.1, 1.2, or if it's a major update, 2.0. Do not worry about the numbers going up and up; it's about getting the policy right – it's all fine.

ALLERGY AWARENESS & SAFETY POLICY

Policy Coverage

THE POLICY APPLIES OR COVERS THE FOLLOWING GROUPS			
Type of Learner	Tick (✓)	Type of Stakeholder	Tick (✓)
Key Stage 3 (KS3) Carousel	✓	Teaching Staff	✓
Key Stage 4 (KS4) GCSE	✓	Education Support Staff	✓
Key Stage 5 (KS5) Level 2	✓	Administrative Support Staff	✓
Key Stage 5 (KS5) Level 3	✓	Directors	✓
Key Stage 5 (KS5) A Levels	✓	Employers	✓
Apprentices	✓	Visitors / Contractors	✓

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1. Policy Aims and Objectives

This policy outlines the London Design and Engineering (LDE) UTC's approach to allergy management, in line with the Department for Education's statutory guidance published in July 2026 ([Allergy safety in schools statutory guidance](#))

Benedict's Law introduces a consistent national framework for allergy safety in schools, requiring whole-school allergy policies, mandatory staff training, access to adrenaline devices, and the creation of Individual Healthcare Plans for learners with allergies.

This policy outlines how the whole-college 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 we support our learners with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy-aware place of work and study.

This policy applies to all staff, learners, parents and visitors to the college and should be read alongside the Medical Conditions Policy and other related policies:

- Child Protection and Safeguarding
- Equalities, Diversity and Inclusion

2. What is an Allergy?

An 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.

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

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.

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

3. Definitions

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

ALLERGEN: A normally harmless substance that, for some, triggers an allergic reaction. You 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.

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

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

ADRENALINE AUTO-INJECTOR: Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAI, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For this Policy, we will refer to them as Adrenaline Devices or ADs, to include other adrenaline devices such as EURNeffy (see below).

ALLERGY ACTION PLAN: This is a document filled out by a healthcare professional, detailing a person’s allergy and their treatment plan¹.

ASTHMA: Asthma is a common, long-term condition which affects 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.

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 they have asthma symptoms, and when to seek emergency help when they have an asthma attack.²

DESIGNATED ALLERGY LEAD: The member of staff responsible for overseeing allergy and asthma management across the college and acting as the main point of contact for learners, parents and staff. This is referred to as the named senior leader in the statutory guidance.

EMERGENCY RESPONSE PLAN: A document (also known as a Critical Incident Plan) that outlines a college's procedure for managing an emergency and should be fit for purpose to manage a serious allergic reaction (anaphylaxis).

EURNEFFY: EURNeffy (also known as Neffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector.

INDIVIDUAL HEALTHCARE PLAN: A detailed document outlining an individual learner’s medical conditions, history, treatment, risks and action plan. This document is created by the college in collaboration with parents/carers and, where appropriate, learners. All learners with an allergy that requires active management should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

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 college site.

¹ The Allergy Team recommends the BSACI Allergy Action Plan paediatric templates which include versions for: people without a prescribed adrenaline device, and people prescribed with different brands of adrenaline device. [Paediatric Allergy Action Plans - BSACI](#)

² The Allergy Team recommends the Asthma and Lung UK Asthma Action Plan template. <https://www.asthmaandlung.org.uk/conditions/asthma/child/manage/action-plan>

SPARE ADRENALINE DEVICES: Schools can purchase spare **adrenaline devices**. These should be held as a back-up, in case learners' 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.³

4. Roles and Responsibilities

The LDE UTC takes a whole-college approach to allergy management. **All** staff must complete the College's allergy awareness training programme, including any statutory training requirements introduced by future legislation.

4.1 Named Allergy Director

The Named Allergy Director is Anne Heal. They work in partnership with the Designated Allergy Lead to ensure allergy safety is overseen at governing body level. They are responsible for:

- Ensuring allergy-related risks are included on the college's risk register and actively managed by the governing body;
- Providing strategic oversight of the college's Allergy Safety Policy, ensuring it is reviewed at least annually and published on the LDE UTC website;
- Acting as the governing body's named point of contact for allergy-related matters;
- Satisfying themselves that the college's allergy management arrangements meet legal and statutory requirements and reflect best practice;
- Receiving regular updates from 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 college acts on any learnings to reduce the risk of future incidents.

4.2 Designated Allergy Lead

The Designated Allergy Lead is Gloria Gold, Deputy Headteacher for Pastoral. They report to the Principal and the Named Allergy Director, who is responsible to the governing body for the Allergy Awareness and Safety Policy.

They are responsible for:

- Leading the publication and implementation of a college-wide Allergy Awareness and Safety Policy;
- Ensuring the safety, inclusion and wellbeing of learners, staff and visitors with an allergy;
- Taking decisions on allergy management across the college;

³ Currently only EpiPen and Jext pens are legally available for schools to hold as spares but legislation is likely to change soon, making EURNeffy (approved for use in the UK in 2025) available to purchase.

- Championing and practicing allergy and asthma awareness across the college;
- Being the overarching point of contact for staff, learners and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff⁴;
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, learners and parents have a good awareness of the college's Allergy Awareness and Safety Policy, and other related procedures⁵;
- Reviewing the college's stock of spare adrenaline devices (checking the college 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;
- Reporting any allergy-related incidents or near misses to the Designated Allergy Lead as soon as possible and participating in any subsequent investigation or review.
- Keeping a record of any allergic reactions or near-misses, reporting these to the governing body and appropriate authority (e.g. under RIDDOR) 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 Awareness and Safety Policy; and
- The Designated Allergy Lead will review the need for practical allergy emergency exercises and simulations. Appropriate drills or exercises may be undertaken by trained first aid staff to test emergency response procedures and identify areas for improvement.

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 Director as appropriate.

4.3 Reception Team

The front office is responsible 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 learner 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 individual healthcare plan if necessary) and ensuring arrangements are in place to support them;

⁴ Although the Designated Allergy Lead will have ultimate responsibility, the collation of information may be delegated to another member of staff, for example, the school nurse or administrator.

⁵ Consider obtaining and recording confirmation from staff that they have read and understood the policy.

- Supporting the Designated Allergy Lead with disseminating this information to all college 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), coordinating medication with families and ensuring medication is in date⁶;
- Keeping an adrenaline device register to include adrenaline devices prescribed to pupils and the college's stock and location of spare adrenaline devices, including brand, dose and expiry date.;
- Regularly checking that spare adrenaline devices are where they should be, are easily accessible in case of emergency, and that they are in date;
- Replacing the spare adrenaline devices when necessary;
- Providing on-site adrenaline device training for staff and learners and refresher training as required, e.g. before college trips

4.4 Admissions Team

The Admissions Team is likely to be the first to learn of a learner or visitor's allergy. They should work with the Designated Allergy Lead and the college nursing team/medical lead to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity⁷;
- There is a clear structure in place to communicate this information to the relevant parties (i.e. front office, catering team);
- Parents and applicants are informed of catering arrangements during admission events;
- Plans are made for emergency medication if the learner is to be left without parental supervision; and
- There is liaison with the learner's previous school, or future school to ensure a smooth transition between settings.

4.5 All staff

All college staff, including teaching staff, support staff, and occasional staff (for example, sports coaches and those running breakfast and after-college clubs are responsible for:

- Championing and practising allergy and asthma awareness across the college;
- Reading, understanding and putting into practice the Allergy Awareness and Safety Policy and related procedures, and asking for support if needed;

⁶ While it is the responsibility of parents/carers to ensure medication is up to date, the nursing team/medical lead should also have systems in place to check this and notify the parents/carers when they see the expiry dates are approaching in respect of medicines held by the college

⁷ This should be in place before a school visit, an Open Day or Taster Days if food is offered or likely to be eaten or if a learner is likely to be left at the college without a parent/carer

- Being aware of learners (and staff, when necessary) with allergies and what they are allergic to;
- Considering the risk to learners with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring learners always have access to their medication, including carrying it on their behalf if necessary⁸;
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Whilst it is the college's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months, they should alert their line manager;
- Considering the safety, inclusion and wellbeing of learners with allergies at all times. Preventing and responding to allergy-related bullying, in line with the college's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the Reception Team; and
- Ensuring that learners have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving the college site for a match or trip.

4.6 All parents

All parents and carers (whether their child has an allergy or not) are responsible for:

- Being aware of and understanding the college's Allergy Awareness & Safety Policy and considering the safety, inclusion, and wellbeing of learners with allergies;
- Providing the college Reception Team 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 college of any related conditions, for example asthma, hay fever, rhinitis or eczema;
- Considering and adhering to any food restrictions or guidance the college has in place when providing food, for example in packed lunches, as snacks or for fundraising events;
- Refraining from telling the college 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 of children with allergies

In addition to paragraph 4.6, the parents and carers of children with allergies should:

- Work with the college to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan;

⁸ This may depend on the age of the pupils and the management of adrenaline devices in the school

- If applicable, provide the college or their child with two labelled adrenaline devices and any other medication, for example antihistamine (with a dispenser, ie. spoon or syringe), inhalers or creams;
- 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 college;
- Update the college with any changes to their child's condition and ensure the relevant paperwork is updated too;
- Provide the college 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 learners

All learners at the college 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.
- Learn how to recognise an allergic reaction and support their peers and staff in case of an emergency; and
- Check the ingredients of any food brought in from home to ensure that they adhere to any food restrictions or guidance about food being brought in.

4.9 Learners with allergies

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

- Knowing what their allergies are and how to mitigate personal risk;
- Avoiding their allergen as best as they can;
- Understanding the importance of following the college-specific processes of lunch and snack services and how that mitigates risk;
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- Carrying two adrenaline auto-injectors with them at all times;
- Understanding how and when to use their adrenaline auto-injector and only using them for their intended purpose;

- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any college processes or systems related to their allergy;
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies;
- For Sixth Form, adult learners and staff: If leaving the college site with permission during the college day, knowing what to do if they have an allergic reaction off the college premises including how to treat themselves and how to raise the alarm to get help; and
- Ensuring they have their medication with them on the journey to and from college.

5. Information and Documentation

5.1 Register of learners and staff with an allergy

The college has a register of learners and a 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 learners and staff with an allergy where no adrenaline devices have been prescribed.

The College will seek allergy information from staff during recruitment, induction and ongoing employment processes to ensure appropriate support and risk management arrangements can be established where necessary.

5.2 Individual Healthcare Plans

Each learner with an allergy requiring active management by the college has an Individual Healthcare Plan⁹. 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 learner has asthma and any other medical conditions and necessary details;
- Details of the medication that the learner has been prescribed, including their dose; this should include 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 learner's condition may impact on their learning or wellbeing;
- If the child can take responsibility for their condition, including in an emergency;
- A photograph of each learner and emergency contact details; and
- A copy of their Allergy and/or Asthma Action Plan.¹⁰

⁹ This is likely to include anyone with a food allergy, whether they have a prescribed adrenaline device or not.

¹⁰ See definitions for the BSACI templates.

6. Assessing Risk

Allergens can crop up in unexpected places. Staff (including visiting 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;
- Bringing animals into the college, 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 learners; and
- Planning special events, such as cultural days and celebrations.

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

7. Food, including Meal Times and Snacks

7.1 Catering in college

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

- Due diligence is carried out with regard to allergen management when appointing catering providers;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- Catering staff are available to discuss the provision of allergen safe meals with parents/ carers;
- 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 the learners with allergies and what their allergies are, supported by college staff;
- The catering team will endeavour to provide varied meal options to learners and staff with allergies;
- The college has robust procedures in place to identify learners with food allergies, these are included in information collated on admission and then added to the college’s database by the reception team¹¹;

¹¹ There should be two methods in place. Ideally one should be a visual check from a member of staff familiar with the learners who have allergies. Photos of learners with allergies should also be available. There should be back up plans in place, and documented in case of staff absences.

- Dishes and menus containing the main 14 allergens (see Allergens definition) will be clearly labelled using full words, not symbols or abbreviations. Other ingredient information will be available on request.
- Information on allergens will be available for the learner to check independently;
- All pre-packed food produced on site, including sandwiches and similar items, will be labelled in accordance with Natasha's Law and will clearly identify relevant allergens.
- Where changes are made to the ingredients which involve the introduction of a known allergen this will be communicated to learners with dietary needs by the Designated Allergy Lead.
- Food provided at breakfast club will follow these procedures;
- Where food or refreshments are provided for visitors, the organiser will make reasonable efforts to establish any food allergies or dietary requirements in advance and ensure appropriate allergen information is available

7.2 Food brought into the college

The College is not an allergen-free environment. Whilst the College canteen does not serve nuts or nut products, allergenic foods may be present elsewhere on site.

All food provided by the catering team will have clear allergen information available, and the catering provider will ensure a readily identifiable member of staff is available to advise on allergens in menu items.

Staff may bring food into the College for sharing with colleagues but should make others aware of any known allergens present.

Staff should not provide homemade or unpackaged food directly to learners. Any food provided to learners should be pre-packed, clearly labelled and include allergen information where required.

The College reserves the right to restrict or prohibit specific foods or allergens where necessary to manage identified risks to learners, staff or visitors.

Learners should not share food with one another. Sixth Form learners are not permitted to bring in food purchased outside of the college (e.g. from food outlets on the university campus)

7.3 Food hygiene for learners

- The college will encourage learners to wash their hands with soap and warm water before and after eating;
- Parents/carers and learners will be advised that water bottles and packed lunches should be clearly labelled and food should not be shared or swapped; and
- Throwing food is not allowed.

8. Educational Visits and Sports Fixtures

- Staff leading the trip will have a register of learners with allergies and details of their medication. 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 learners where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff (and some learners, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction;
- Allergens will be clearly labelled on catered packed lunches.
- See Adrenaline Devices section for College Trips and Sports Fixtures.

9. Insect Stings

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 or cosmetics; and
- Keep food and drink covered.

The college's Estates Team will monitor the grounds for wasp or bee nests. Learners (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the college grounds and avoid them¹².

10. Animals

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 learner 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 done prior to the visit;
- Areas visited by animals will be cleaned thoroughly;
- Anyone in contact with an animal will wash their hands after contact;
- College trips that include visits to animals will be carefully risk assessed.

¹² If the school keeps bees and has a pupil with a bee sting allergy advice should be sought on how to manage this.

11. Allergic Rhinitis / Hay Fever

The College recognises that seasonal pollen allergy and hay fever can affect attendance, wellbeing and learning. Learners are encouraged to bring prescribed medication to college and staff will support learners in accordance with their healthcare plans where appropriate. Grounds maintenance activities will take account of high pollen periods where reasonably practicable.

12. Inclusion and Mental Health

Allergies can have a significant impact on mental health and wellbeing. Learners 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 learners with allergies;
- No child should be excluded from taking part in a college activity, whether on the college premises or a college trip because of their allergies;
- Learners with allergies may require additional pastoral support including regular check-ins from their tutor / Head of Year;
- Affected learners will be given consideration in advance of wider college discussions about allergy and college Allergy Awareness initiatives;
- Bullying related to allergy will be treated in line with the LDE UTC's Anti-Bullying Policy; and
- Uniform policies take into account that learners may need emergency medication near them at all times.

13. Adrenaline Devices

See the government guidance on [Adrenaline Devices in Schools](#).

13.1 Storage of adrenaline devices

- Learners prescribed with adrenaline devices will have easy access to two in-date devices at all times;
- This College maintains spare emergency adrenaline devices (ADs) for use in accordance with Government guidance.
- The primary location for emergency ADs is the Medical Room, which is accessible to trained first aid staff and is located within approximately five minutes of all areas of both College buildings.
- An additional adrenaline device will be installed within the College canteen. Catering staff assigned to the canteen will receive training in its use.

- The Designated Allergy Lead and Medical Team will review stocks annually and ensure sufficient devices are available and in date.
- Learners will be encouraged to have their own device on them at all times.
- 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.

13.2 Spare adrenaline devices¹³

This college has 2 pairs of spare adrenaline devices to be used in accordance with government guidance.

The locations of spare adrenaline devices are clearly signposted. These are: the medical room and canteen. When necessary, a spare device will be located in the emergency first aid kit taken out on trips and visits.

The Allergy Lead alongside the Reception team are responsible for:

- Deciding how many spare devices are required¹⁴;
- What dosage is required, based on the Resuscitation Council UK's age-based guidance (see page 11);
- Which brand(s) to buy. Schools are recommended to buy a single brand, if possible, to avoid confusion;
- The purchasing of spare adrenaline devices. See government guidance above; and
- Distribution around the college site and clear signage.

13.3 Adrenaline devices on off-site activities

- No child with a prescribed adrenaline device will be able to go on a college trip without two of their own devices. It is the trip leader's responsibility to check they have them;
- Adrenaline devices will be kept close to the learners 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 learners will be aware of those 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. This should be recorded as part of the risk assessment process.

¹³ You may want to include spare asthma inhalers in this section too.

¹⁴ You may want to consider a couple of spare adrenaline devices in grab bags for school trips/ matches, as well as around the site.

14. Responding to an Allergic Reaction / Anaphylaxis

See the **Appendix** to this policy for details of how to recognise and respond to an allergic reaction.

In all cases:

- A learner with a known allergy should be treated in accordance with their Allergy Action Plan and/or Individual Healthcare Plan.
- If anaphylaxis is suspected, adrenaline should be administered without delay, using the college's spare device if needed¹⁵.
- 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 learner in an ambulance until a parent or guardian arrives.
- If an individual experiences a life-threatening medical emergency, any member of staff, volunteer or bystander may take reasonable action to save a life. Staff should be reassured that acting in good faith and to the best of their ability during an emergency will not constitute misconduct. This includes administering adrenaline where anaphylaxis is suspected. The priority in an emergency is to act promptly and reasonably to protect life.

Depending on the circumstances, it may be necessary to instigate the college's wider Emergency Response Plan.

15. Training

The college 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, catering staff, site staff and others who may oversee learners at breakfast or after-college clubs.

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;¹⁶
- How to treat an asthma attack using a reliever inhaler;
- How the college manages allergy, for example understanding the college'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;

¹⁵ The MHRA says that in exceptional circumstances, a spare adrenaline device can be administered to anyone for the purposes of saving their life, even without consent.

¹⁶ Staff should be given the opportunity to practise with a training adrenaline auto-injector

- Where adrenaline devices are kept (both prescribed devices and spare devices) and how to access them;
- The importance of inclusion of learners 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
- Appropriate drills or exercises may be undertaken by trained first aid staff to test emergency response procedures and identify areas for improvement.

16. Asthma

The college understands that it is vital that learners 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 learners with asthma will have an Asthma Action Plan. Where relevant, an Asthma Action Plan will be in addition to an Allergy Action Plan¹⁷.
- The Asthma Action Plan will be included in the learner's Individual Healthcare Plan, and will include medical and parental consent for staff to administer medicines, including an emergency reliever inhaler in the event of an asthma attack.
- Children and young people known to have asthma should have their own reliever inhaler at college at all times and on the journey to and from LDE UTC.
- Where a learner is able to manage their asthma themselves, they should keep their inhaler on them. If they cannot, it should be stored in a clearly labelled, easily accessible location.
- Emergency inhalers are held in the medical room. These are checked to ensure that they are in date and working on a regular basis.

17. Reporting Allergic Reactions

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

Each record should include: Who was affected, what happened, when and where, why the incident occurred (as far as is known), how staff and the learner responded; what was done

¹⁷ Allergy and Lung UK have a template Asthma Action Plan here:
<https://www.asthmaandlung.org.uk/conditions/asthma/child/manage/action-plan>]

to support the individual; whether emergency services were called and how the incident concluded

All incident reports should be shared with:

- the learner's parents or carers, who will be given the opportunity to discuss the incident and contribute their views to the review; and
- the Named Allergy Director and the governing body, so they can consider what lessons to learn and whether policy 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:

- schools that operate as food businesses must report any allergen-related food safety incidents to their local authority;

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.

Following any incident or near miss, the college will meet with the learner and their parents/carers (as appropriate) to ensure they are confident the setting remains safe.

The college recognises the impact of an incident or near miss not just on the individual and their family, but also on staff who responded and young people who witnessed it and will offer appropriate support.

Appendix A: Managing Allergic Reactions



MANAGING ALLERGIC REACTIONS

ALLERGIC REACTIONS VARY

Allergic reactions are unpredictable and can be affected by factors such as illness or hormonal fluctuations.

You cannot assume someone will react the same way twice, even to the same allergen.

Reactions are not always linear. They don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

MILD TO MODERATE ALLERGIC REACTIONS

Symptoms include:

- Swollen lips, face or eyes
- Itchy or tingling mouth
- Hives or itchy rash on skin
- Abdominal pain
- Vomiting
- Change in behaviour

Response:

- Stay with learner
- Call for help
- Locate adrenaline devices
- Give antihistamine. Note: if any signs of anaphylaxis are present, give adrenaline without delay.
- Make a note of the time
- Phone parent or carer
- Continue to monitor the learner for at least 60 minutes in case the reaction gets worse

SERIOUS ALLERGIC REACTIONS / ANAPHYLAXIS

The most serious type of reaction is called **ANAPHYLAXIS**. Anaphylaxis is uncommon, and children experiencing it almost always fully recover.

In rare cases, anaphylaxis can be fatal. It should always be treated as a time-critical medical emergency.

Anaphylaxis usually occurs within 20 minutes of eating a food but can begin 2-3 hours later.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis.

Appendix B: Responding to Anaphylaxis



RESPONDING TO ANAPHYLAXIS

SYMPTOMS OF ANAPHYLAXIS

A – Airway

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen Tongue

B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

C - Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.

DELIVERING ADRENALINE

1. Treat the patient where they are. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing, but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions. Pupils may be able to do this themselves, but some will require or want adult support. Whilst all members of staff should be trained, in an emergency, anyone can administer adrenaline.
5. Make a note of the time you gave the first dose.
6. Call 999 for an ambulance (or get someone else to do this while you give adrenaline). Tell them you have given adrenaline for anaphylaxis.
7. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
8. Call the pupil's emergency contact.

9. If their condition has not improved or symptoms have got worse, give a second dose of adrenaline after 5 minutes, using a second device. Call 999 again and tell them you have given a second dose and to check that help is on the way.
10. Start CPR if necessary.
11. Hand over used devices to paramedics and remember to get replacements.
12. 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 them in an ambulance until a parent or guardian arrives.

For more information, see the Government's [Guidance for the use of adrenaline auto-injectors in schools](#).