



Allergy Safety Policy

Produced by	Suzanne Wilson HCAT Safeguarding Lead
Approved by	Trustee Board
Date approved	October 2026
Review date	October 2027, or sooner if necessary.
Related Trust policies	• Asthma • Behaviour • Child Protection • Educational Visits • First Aid • Health & Safety • Staff Code of Conduct • Special Educational Needs & Disability • Supporting Children with Medical Needs
Related national guidance	• DfE: Allergy Safety in Schools •
Availability	Accessible via individual school & Trust websites and Share Point

Contents

1. Purpose & principles
2. Legal & statutory framework
3. Key terms
4. Roles & responsibilities
5. Identifying pupil's risk & maintaining records
6. Individual Healthcare Plans
7. Age-appropriate self-management & access to medication
8. Minimising risk
9. Allergy awareness
10. Catering
11. Food brought into school
12. Adrenaline devices & emergency medication
13. Responding to an allergic reaction & anaphylaxis
14. Curriculum, sport, clubs, visits, residential trips & transport
15. Inclusion, wellbeing & emotional support
16. Serious incident, near misses & learning
17. Training & awareness
18. Data Protection
19. Monitoring, assurance, publication & review

Appendices

1. School implementation schedule
2. Management flowchart
3. Management system
4. Allergy & intolerance notification form
5. Allergy management risk assessment
6. Medical diet request form
7. Medical diet approval form

1. Purpose & Principles

The Trust is committed to ensuring that pupils and students with allergies are safe, included and able to participate fully in school life, while being treated with dignity and respect. Allergic reactions can range from mild symptoms to anaphylaxis, a potentially life-threatening reaction requiring an immediate emergency response.

Allergic reactions cannot be made completely risk-free. Effective allergy management therefore depends on an allergy-aware culture, proportionate and practical risk reduction, reliable individual support plans, appropriate food safety arrangements, rapid access to emergency medication and a confident response when a reaction occurs.

This policy establishes a consistent Trust-wide approach to identifying and reducing allergy-related risks, supporting individual pupils and students, managing food safely, ensuring appropriate access to emergency medication, responding to allergic reactions, training staff, and learning from incidents and near misses.

The policy applies throughout the school day and to breakfast and after-school provision, educational and residential visits, sporting events, performances and any other activity organised by or on behalf of the school. It applies to pupils and students, staff, volunteers, agency and supply staff, caterers and visitors, as relevant.

The Trust will:

- recognise allergy safety as a whole-school responsibility. It is not limited to mealtimes or to pupils and students already known to have an allergy;
- take reasonable and proportionate steps to reduce exposure to known allergens, recognising that schools cannot guarantee an entirely allergen-free environment;
- provide individualised arrangements that enable pupils and students with allergies to participate as fully as possible in lessons, meals, trips, sport, clubs and wider school life, without unnecessary segregation or stigma;
- ensure individual allergy action plans, emergency medication and appropriately trained adults are available wherever a pupil or student may reasonably need them;
- support pupils and students to develop increasing independence in managing their allergy, according to their age, understanding, competence and individual needs, while recognising that this does not remove the school's responsibility to provide appropriate support;
- work in partnership with parents, pupils and students and relevant healthcare professionals when planning, implementing and reviewing allergy support;
- ensure staff and other relevant adults understand their responsibilities and are confident in recognising and responding to an allergic reaction, including anaphylaxis; and
- record and review serious incidents and near misses in a learning-focused way, using them to strengthen practice and improve arrangements.

2. Legal & Statutory Framework

- Children's Wellbeing and Schools Act 2026
- Children and Families Act 2014 – Section 100 and new Sections 100A/100B
- DfE – **Allergy safety in schools'** statutory guidance (2026)
- DfE – **Supporting pupils with medical conditions at school** statutory guidance
- Equality Act 2010
- Food Information Regulations 2014
- Requirements for School Food Regulations 2014
- Health and Safety at Work etc. Act 1974

3. Key Terms

Allergy	An immune system reaction to a substance that is usually harmless, such as a food, insect venom, medicine, latex, animal dander or airborne allergen.
Allergen	A substance capable of triggering an allergic reaction in a susceptible person.
Anaphylaxis	A severe, potentially life-threatening allergic reaction affecting Airway, Breathing and/or circulation (ABC).
Adrenaline auto-injector (AAI)	A single-use injection device that delivers adrenaline. Under current arrangements, school 'spare' adrenaline stock is in AAI form.
Individual Healthcare Plan (IHP)	A written plan setting out the additional or different arrangements required to support an individual pupil's medical needs safely and inclusively in school.
Allergy Action Plan	A clinically informed emergency plan specifying the pupil's allergens, symptoms and treatment.
Near Miss	An event that did not cause harm but had clear potential to cause a serious allergy-related incident.
Serious Incident	An allergy related event in which a pupil, staff member or visitor is harmed or placed in immediate and significant risk of harm, including where emergency medication, urgent clinical intervention or emergency services are required.

Coeliac disease and food intolerances are different from food allergies and do not cause anaphylaxis. They can nevertheless have significant health implications and require appropriate dietary management. The Trust and its schools will manage these conditions through their medical conditions and catering arrangements, taking appropriate steps to avoid exposure to foods that may cause harm and, where necessary, to prevent cross-contamination.

4. Roles & Responsibilities

Board of Trustees

- Provides strategic oversight of allergy safety across the Trust and approves the Trust Allergy Safety Policy.
- Receives appropriate assurance that the policy is implemented effectively across all schools and that statutory requirements are being met.
- Ensures allergy safety is considered within Trust-wide risk management and receives information about significant incidents, emerging risks, training and areas for improvement.
- Ensures appropriate governance, resources and systems are in place to support consistent allergy safety arrangements across the Trust.

Chief Executive Officer / Executive Lead

- Provides strategic leadership for allergy safety and ensures that schools implement the Trust policy and statutory requirements effectively.
- Oversees Trust arrangements for assurance, reporting, incident escalation, procurement and sharing learning between schools.
- Ensures changes to legislation, statutory guidance and relevant national advice are reflected in Trust policies, procedures and practice.
- Ensures appropriate support is available to schools where concerns, incidents or gaps in compliance are identified.

Headteacher

- Has overall responsibility for the effective implementation of this policy within the school and for ensuring appropriate arrangements are in place for pupils with allergies.
- Ensures the school meets its statutory duties in relation to allergy safety, including maintaining, reviewing and publicising the school's allergy safety arrangements.
- Appoints a senior Allergy Safety Lead and ensures that sufficient suitably trained staff are available to support pupils, including during activities and at times when pupils are outside their usual classroom setting. (Appendix A)
- Ensures local allergy safety arrangements are documented, understood by relevant staff and reviewed at least annually and whenever there is a significant change in circumstances.

- Ensures appropriate arrangements are made for Individual Healthcare Plans (IHPs), where required, in consultation with parents, the pupil and relevant healthcare professionals.
- Ensures the school has effective arrangements for emergency medication, staff training, risk assessment, incident reporting and learning from incidents and near misses.

School Allergy Safety Lead

- Coordinates the day-to-day implementation of the school's allergy safety arrangements and maintains oversight of local procedures.
- Maintains accurate register of pupils with allergies, IHPs and Allergy/Asthma Action Plans, ensuring relevant information is available to staff who need it to keep pupils safe.
- Coordinates allergy awareness and emergency response training and ensures completion is recorded, including appropriate arrangements for new, temporary, agency and supply staff.
- Supports the completion and review of risk assessments for activities where allergy-related risks may arise, including educational visits, residentials, sporting activities and events involving food.
- Ensures prescribed and school-held emergency medication is stored appropriately, readily accessible and subject to the required checks.
- Coordinates the recording and review of allergic reactions, medication errors and near misses, ensuring learning is identified and appropriate actions are followed through.
- Promotes an allergy-aware culture across the school and works with relevant colleagues, including catering, pastoral, safeguarding and first-aid leads.

Named Medication-Check Staff

- At least two members of staff will be identified to undertake regular checks of school-held spare adrenaline auto-injectors (AAIs) and other designated emergency medication.
- Checks will be completed at least monthly, recorded appropriately and followed up promptly where medication is missing, damaged or approaching expiry.
- Prescribed pupil medication will also be monitored locally to identify concerns about expiry or availability at an early stage. Parents remain responsible for providing prescribed medication that is in date and suitable for use.

All Pupil-Facing Staff

- Understand how to recognise the signs and symptoms of an allergic reaction, including anaphylaxis, and know how to obtain emergency assistance.
- Are aware of pupils with allergies in their care and understand any relevant adjustments, IHPs and emergency arrangements.
- Take reasonable steps to reduce the risk of exposure to known allergens and follow agreed individual healthcare and allergy action plans.
- Know where emergency medication is kept and ensure that an unwell pupil is not sent elsewhere to obtain medication where this could delay treatment.
- Respond promptly to suspected allergic reactions in accordance with the pupil's action plan and school procedures.
- Report allergic reactions, use of emergency medication, medication errors and near misses promptly so that they can be recorded, reviewed and acted upon.

Catering Staff and Catering Providers

- Comply with relevant food allergen legislation and the Trust and school's arrangements for managing food allergies.
- Maintain accurate and accessible information about allergens in food and ensure appropriate controls are in place when preparing, storing and serving food.
- Follow agreed procedures for ingredient changes, substitutions, food preparation and the prevention of cross-contamination.
- Use discreet and reliable systems to identify pupils with food allergies and provide the agreed meals safely.
- Seek clarification and escalate any uncertainty about ingredients, substitutions, allergen information or possible contamination before food is served.

Parents and Carers

- Provide the school with accurate and up-to-date information about their child's allergy, previous reactions, asthma where relevant, prescribed medication and any changes to their child's needs.
- Provide current allergy or Allergy/Asthma Action Plans and prescribed medication required by the school, including two in-date AAIs where these have been prescribed, unless a healthcare professional has advised otherwise.
- Work collaboratively with the school and relevant healthcare professionals when an IHP is required and contribute to its development and review.
- Inform the school promptly of any changes to their child's allergy, medication or healthcare advice.

- Follow school arrangements relating to food brought onto the premises and communicate with the school in advance where specific arrangements are required for events or activities involving food.

Pupils and Students

- Will be involved in decisions about their allergy management in a way that reflects their age, understanding, competence and individual needs.
- Are encouraged to understand their allergy and recognise and communicate symptoms or concerns promptly to an adult.
- Should tell an adult immediately if they feel unwell or believe they may have been exposed to an allergen.
- Should follow their individual action plan and agreed arrangements for managing their allergy.
- Are encouraged not to share food or medication with other pupils.
- Where appropriate and agreed, older or competent pupils may carry and self-administer their prescribed emergency medication. Staff will remain available to provide assistance where required, including where a pupil is unable to administer their medication independently.

5. Identifying pupils at risk & maintaining records

The school will seek accurate and up-to-date information about a pupil's allergies and asthma when they join the school, whether this is at the beginning of the academic year or at any other point during the year. Information will also be requested at the beginning of each academic year and whenever there is a change in a pupil's health needs. This will include obtaining relevant information from the pupil's previous setting as part of admission and transition arrangements and ensuring that information is reviewed when a pupil moves between schools or phases.

The school will maintain a secure allergy register containing the information necessary to support each pupil safely. This will include the known allergen or allergens, the pupil's symptoms and previous reactions where relevant, prescribed medication and its location, whether an Individual Healthcare Plan or Allergy/Asthma Action Plan is in place, and appropriate emergency contact details. Information will be reviewed regularly and updated promptly when circumstances change.

Where appropriate, the school will work with parents, pupils and relevant healthcare professionals to clarify the nature of an allergy, the risks associated with exposure and the support required. Where an Individual Healthcare Plan or Allergy/Asthma Action Plan is provided, staff responsible for the pupil will be made aware of the arrangements and their responsibilities.

Staff and regular volunteers will be given the opportunity to provide information about their own allergies where this is necessary to protect their health and safety. Visitors, volunteers and other individuals involved in school activities may also be asked to provide relevant information where food is being served or where an activity presents a specific allergy-related risk.

Information about allergies will be shared with staff and other adults who need to know in order to keep a pupil safe. This may include teaching staff, lunchtime and pastoral staff, catering and wraparound staff, first-aid trained staff and staff leading educational visits or other activities. Information will be communicated in a proportionate and respectful way, balancing the pupil's right to privacy with the need to ensure that those responsible for their care can recognise a reaction and respond without delay.

Health information is special category personal data and will be handled in accordance with data protection requirements. Information will only be shared where there is an appropriate lawful basis and a genuine need to know. Confidentiality will not, however, prevent critical information from being made available to those who need it in an emergency. Staff must know where relevant allergy information and emergency medication can be accessed and should not delay emergency treatment while attempting to obtain additional information.

Where a pupil's allergy is new, changes in severity, results in an allergic reaction, or their medication or healthcare advice changes, the school will review the pupil's arrangements and update relevant records, plans, risk assessments and staff information as necessary. This will help to ensure that the school's arrangements remain appropriate to the pupil's current needs.

6. Individual Healthcare Plan (IHP)

functional impact on them in school, are at risk of harm as a result of their allergy and require arrangements that are additional to or different from those made generally for pupils. An IHP may therefore be required where an allergy means that a pupil needs specific support, reasonable adjustments or individual arrangements, including where medication is required either routinely or in an emergency.

The IHP will set out the additional and/or different arrangements that will be provided by the school to support the pupil safely and enable them to participate as fully as possible in school life. This will include arrangements for managing the pupil's allergy during the school day and, where relevant, during meals, physical activity, educational visits, residential visits, clubs, wraparound provision and other activities organised by or on behalf of the school. It will also clearly set out what should happen in an emergency.

The IHP will be developed in partnership with the pupil, their parent or carer and, where appropriate, relevant healthcare professionals. The school's Allergy Safety Lead will coordinate the development, implementation and review of the IHP, working with the appropriate staff and ensuring that agreed arrangements are communicated to those who need to know. The Allergy Safety Lead will not provide clinical advice or make clinical decisions and will seek appropriate healthcare advice where clarification is required.

Where a child or young person has an Allergy Action Plan and/or Asthma Action Plan issued by a healthcare professional, this will be attached to or clearly referenced within the IHP. The IHP will not reproduce, or paraphrase clinical instructions where doing so could introduce error. When an updated Action Plan is provided, the IHP will be reviewed to ensure that the school's arrangements remain consistent with the current healthcare advice.

IHPs will be reviewed at least annually and sooner where necessary, including before a planned transition, following a significant change in the pupil's needs or healthcare advice, and following any relevant allergic reaction, medication error or near miss. Where clinical advice is not immediately available, the school will not delay putting appropriate support in place or dismiss concerns. Interim arrangements will be agreed with the pupil and their parent or carer, with appropriate professional advice sought as soon as possible.

The IHP will be accessible to staff who need the information to support the pupil safely, while ensuring that the pupil's health information is handled confidentially and in accordance with data protection requirements.

7. Age-appropriate self-management & access to medication

Schools will take an individualised approach to supporting pupils to develop independence in managing their allergy. Age will be considered alongside the pupil's maturity, understanding, confidence, competence and individual circumstances. There is no single age at which a pupil should be expected to manage their allergy independently.

Where appropriate, pupils will be supported to recognise their symptoms, understand how to avoid known allergens, know where their emergency medication is kept and, where they are able and have been appropriately supported, carry and self-administer their prescribed emergency medication. Younger pupils, or pupils who are not yet able to manage their medication safely, will have appropriate adult support and immediate access to their emergency medication.

The level of support will be agreed with the pupil, parents or carers and, where appropriate, relevant healthcare professionals, and will be documented in the pupil's Individual Healthcare Plan. Support will be reviewed as the pupil develops and whenever their circumstances or needs change.

Staff must not assume that an older pupil can safely self-manage or that a younger pupil cannot develop appropriate independence. Regardless of a pupil's level of independence, appropriate adult support must remain available, and staff must be able to respond if the pupil becomes unable to recognise or manage their symptoms or administer their emergency medication.

8. Minimising risk

Schools will take reasonable and proportionate steps to reduce the risk of pupils being exposed to allergens and to support pupils with allergies to participate safely and fully in school life. Measures will be appropriate to the circumstances and will take account of the individual pupil's allergy, including the allergen and route of exposure, the severity and history of previous reactions, the pupil's age, understanding and competence, and the activity or environment involved.

Individual and Activity Risk Assessment

Where a pupil who is at risk of a significant allergic reaction is taking part in an activity or entering an environment where there is a foreseeable risk of exposure, the school will consider whether a specific allergy risk assessment is required. This may include food technology, cooking, tasting or hospitality activities; science experiments and practical demonstrations involving food, latex, chemicals, animals or other known triggers; art, craft and sensory activities involving food packaging, play materials, glues, balloons or natural materials; animal handling, farms and petting zoos; outdoor activities where insect stings are a known risk; PE, swimming, sports fixtures and exercise where allergy or asthma triggers may be relevant; educational and residential visits, travel and external venues; and celebrations, cultural events, fundraising activities, fairs or other events where food is involved.

Risk assessments will identify appropriate control measures while seeking to ensure that pupils with allergies are not unnecessarily excluded or segregated from activities. Where a planned activity presents an avoidable allergy risk, the school should first consider whether a safer alternative can be provided for the whole group before considering arrangements that would exclude the pupil with an allergy.

Everyday Allergy-Safe Practice

Everyday arrangements will be proportionate to the risks identified and will support an allergy-aware culture across the school. Pupils and staff should wash their hands before and after eating and, where appropriate, after contact with known allergens. Food, drinks, utensils and containers should not be shared where this could create a risk of allergen exposure.

Where required, pupils will have clearly identified personal items such as water bottles and lunchboxes, and agreed systems will be used to identify allergy-safe meals. Food preparation and eating areas will be cleaned using appropriate methods to reduce the risk of allergen cross-contact.

Ingredients and allergen information must be checked each time food is prepared, purchased or served where relevant. Staff must not assume that a product is safe because it has previously been used safely, as ingredients, recipes, suppliers and manufacturing processes can change.

The school recognises that it is not possible to eliminate all allergy risk. The focus will therefore be on practical measures that reduce foreseeable risks while enabling pupils with allergies to participate as fully as possible in lessons, activities, visits and wider school life.

9. Allergy Awareness

Our schools promote an allergy-aware approach rather than seeking to create completely allergen-free environments. Schools will not describe themselves as "allergen-free", as it is not possible to guarantee that an environment is entirely free from allergens and doing so could create a false sense of security.

Where a particular food or allergen presents a significant and foreseeable risk, the school may introduce restrictions where these are identified through an individual or activity risk assessment as reasonable and proportionate. Any such restriction will form part of a wider approach to allergy safety and will not replace effective food safety arrangements, staff awareness and training, individual healthcare plans, appropriate risk assessment or the availability of emergency medication and response arrangements.

10. Catering

The Trust provides catering through catering staff employed centrally and managed by the Catering Manager within the Trust's Shared Services Central Team. The Trust and its schools will ensure that appropriate arrangements are in place to provide safe and suitable food options for pupils with allergies and other dietary needs.

The catering team will:

- receive appropriate training in food allergies, allergen management and the procedures required to keep pupils safe;
- have access to accurate and up-to-date information about pupils with allergies who use the catering service, including any specific dietary requirements and agreed arrangements;
- ensure that school menus are available for parents and carers to view and that relevant ingredients and allergen information are clearly identified;
- check ingredients and allergen information whenever food is prepared, purchased or served, including when menus, recipes, products or suppliers change;
- ensure that any changes to menus continue to meet the agreed dietary requirements of pupils with allergies;
- follow appropriate food hygiene and allergy safety procedures when preparing and serving food to reduce the risk of allergen cross-contact;
- provide appropriate allergen information for the 14 regulated allergens in accordance with current legal requirements and Food Standards Agency guidance;
- ensure that pupils with significant allergy risks are not knowingly provided with food that is unsuitable for their individual allergy and agreed dietary arrangements;
- have reliable arrangements for identifying pupils with allergies, including appropriate use of photographs or other agreed identification systems where necessary and proportionate;
- ensure that allergy information remains available to catering staff when there are changes in staffing, including staff absence, rotation or the use of temporary staff.

The school will ensure that the catering team receives relevant and timely information when a pupil's allergy or dietary requirements change. The school's Allergy Safety Lead and catering team will work together to ensure that arrangements remain consistent with the pupil's Individual Healthcare Plan and/or Allergy Action Plan where applicable.

Food Restrictions

The Trust recognises that it is not possible to eliminate all allergens from the school environment. Food restrictions will therefore be considered as part of a wider approach to allergy safety and will be based on identified risks rather than blanket restrictions.

School lunch menus will be nut-free. Where a particular food or allergen presents a significant and foreseeable risk, the school may introduce additional restrictions where these are considered reasonable and proportionate to the circumstances.

Where restrictions are in place, these will be communicated clearly to pupils, staff and parents/carers as appropriate. Schools will also consider how food is brought into and consumed within the school environment, including the need to avoid sharing food and to maintain appropriate handwashing and cleaning arrangements.

Where a pupil brings food into school that presents a significant allergy risk, the school will consider the safest and most appropriate response based on the individual circumstances and any relevant risk assessment. This may include asking the pupil to eat the food separately from others. Any response should be proportionate and avoid unnecessarily stigmatising or excluding the pupil.

11. Food brought into school

Food brought into school for lunches, snacks, birthdays, celebrations or other events must follow the school's allergy safety arrangements. Parents and carers should avoid sending foods containing nuts or any other allergens where the school has identified a specific risk or restriction.

Where shop-bought food is provided for celebrations or other shared events, it should be in its original packaging so that staff can check the ingredients and allergen information before it is offered to pupils. This information should not be relied upon where the packaging or ingredient information is unavailable.

Home-made food intended for sharing should not normally be brought into school unless this has been agreed in advance with the school. This is because the ingredients and preparation methods cannot always be verified and the risk of allergen cross-contact may be unknown.

Where food is brought into school that does not meet the agreed arrangements, the school will consider the safest and most appropriate response based on the circumstances and the individual allergy risks involved. This may include not allowing the food to be shared and asking for it to be taken home. Any response should be proportionate and should avoid unnecessarily excluding or stigmatising pupils.

12. Adrenaline devices & Emergency medication

Prescribed adrenaline devices

Pupils prescribed adrenaline for the treatment of anaphylaxis must have rapid access to their prescribed emergency medication whenever they are under school supervision. This includes during lessons, breaks, lunchtime, PE and sporting activities, clubs and wraparound provision, educational and residential visits, and other activities organised by or on behalf of the school.

Where adrenaline auto-injectors (AAIs) are prescribed, two in-date prescribed devices should normally be available, unless the treating clinician has advised otherwise or the prescribed emergency medication is another type of adrenaline device.

Where a pupil is able and has been appropriately supported to manage their own medication, they may carry their prescribed adrenaline device. Where this is not appropriate, the medication will be stored in a clearly identified location that is immediately accessible to staff and must not be locked away where this could delay treatment. Arrangements will be set out in the pupil's Individual Healthcare Plan and/or Allergy Action Plan.

Prescribed adrenaline devices will be clearly labelled, kept in accordance with the manufacturer's instructions and accompanied by the pupil's current Allergy Action Plan where applicable. They will normally be stored at room temperature and protected from direct sunlight and temperature extremes. Expiry dates and storage arrangements will be checked regularly.

A pupil experiencing a suspected allergic reaction must not be sent to retrieve their own medication. Staff must bring the emergency medication to the pupil and follow the pupil's Allergy Action Plan and the school's emergency procedures without delay.

Parents and carers are responsible for providing and replacing the pupil's prescribed medication before it expires, unless another arrangement has been formally agreed. The school will monitor expiry dates and provide reasonable reminders to parents and carers where replacement medication is required. Arrangements will also be in place for prescribed medication that is taken home for holidays, visits or other travel and subsequently returned to school, so that the pupil is not left without appropriate emergency medication.

Spare adrenaline auto-injectors

Our schools will maintain a supply of spare adrenaline auto-injectors (AAIs) for use as emergency backup. Spare AAIs are intended to provide an additional safeguard in an emergency and must not be used as a replacement for a pupil's own prescribed medication.

Spare AAIs will be held in pairs and in age-appropriate doses, in accordance with current DfE guidance. The number and location of spare AAI pairs will take account of the size and layout of the school and must allow an appropriate device to be brought to a pupil without avoidable delay.

Spare AAIs will be stored in clearly labelled emergency anaphylaxis kits in an agreed, readily accessible location. They will **not** be locked away where this could delay treatment. Where necessary, additional kits will be located in other areas of the school or taken on visits and activities to ensure that emergency medication remains rapidly accessible.

The school will designate named staff to check the spare AAIs at least monthly and after any use. Checks will confirm that the appropriate number and doses are available, the devices are within their expiry dates, packaging and devices are intact, and that the kits remain accessible and stored in accordance with manufacturer instructions. Records of these checks will be maintained.

Any spare AAI that has been used, is damaged or has reached its expiry date will be replaced promptly and disposed of safely through an appropriate route.

The school will have arrangements to ensure that a spare AAI can be brought to a pupil experiencing a suspected anaphylactic reaction as quickly as possible. The Allergy Safety Lead or another designated senior member of staff will test these arrangements through appropriate drills and whenever there are significant changes to the school site, staffing arrangements or routines.

13. Responding to an allergic reaction & anaphylaxis

Emergency Rule. Anaphylaxis is a medical emergency. If Airways, Breathing or Circulation symptoms are present, give adrenaline without delay in accordance with the action plan/device instruction and call 999. Do not wait for a rash or for symptoms to become more severe.

Staff must act promptly and follow the pupil's Allergy Action Plan where one is available. If there is any doubt about whether a reaction is anaphylaxis, it is safer to treat it as anaphylaxis and seek emergency medical assistance.

1. **Keep the pupil with you and call for help.** Do not leave the pupil alone. Send another adult to get emergency medication and assistance where necessary.
2. **Position the pupil safely.** Keep them lying flat with their legs raised where possible. If breathing is difficult, they may sit up or be propped up, but they must not stand or walk. A pregnant pupil should be positioned on their left side where possible.
3. **Give adrenaline immediately.** Use the pupil's prescribed adrenaline auto-injector (AAI) without delay, following their Allergy Action Plan where available. Where appropriate, a school spare AAI may be used in accordance with current law and statutory guidance. Note the time that adrenaline is given.
4. **Call 999 immediately.** State clearly that the pupil is experiencing, or is suspected of experiencing, anaphylaxis. Follow the instructions given by the emergency operator.
5. **Give a second dose of adrenaline if required.** If the pupil's symptoms have not improved after 5 minutes, give a second adrenaline device if one is available. If symptoms worsen before this time, follow the emergency operator's instructions and give further adrenaline where advised.
6. **If the pupil becomes unresponsive and is not breathing normally, start CPR.** Use an automated external defibrillator (AED) if one is available and follow emergency first-aid training and the instructions of the emergency services.
7. **Contact the parent or carer.** This should be done as soon as practicable once emergency treatment is underway. The school should provide clear information about the reaction, the treatment given and the action taken. For older pupils, the school should follow the relevant incident-reporting and consent arrangements set out in this policy.
8. **Ensure emergency medical assessment.** Any pupil who has been treated for suspected anaphylaxis or has been given emergency adrenaline must receive assessment by emergency healthcare services and should be taken to hospital for further assessment and observation in accordance with clinical advice.

Following an anaphylaxis emergency, the school will record the incident, inform the relevant staff and review the pupil's Individual Healthcare Plan, Allergy Action Plan, risk assessment and medication arrangements where necessary.

14. Curriculum, Sports, Clubs, educational visit, residential & transport

Pupils with allergies should have equitable access to school life and should not be unnecessarily excluded from activities, educational visits or residential visits because of their allergy. Schools should plan ahead to ensure that appropriate arrangements are in place rather than relying on parents or carers to attend in order for a pupil to participate.

When planning an activity or visit, the school will consider the individual pupil's allergy and any foreseeable risks associated with the activity or environment. This may include known allergens, food provision, travel arrangements, access to emergency medication, communication and mobile phone coverage, distance from emergency healthcare and arrangements for responding to an allergic reaction.

Relevant staff will receive the information and training they need before the activity or visit. The pupil's prescribed emergency medication and current Allergy Action Plan will accompany them and remain readily accessible at all times. Medication must not be stored in luggage or in a vehicle or other location that could become separated from the pupil or supervising staff.

At least one accompanying adult must be able to recognise the signs of anaphylaxis and respond appropriately, including administering the pupil's prescribed emergency medication where required. Staffing arrangements will be sufficient to maintain appropriate supervision and respond effectively if an emergency occurs.

Where appropriate and permitted under current guidance, spare adrenaline auto-injectors will also be taken on educational visits and other activities away from the school site.

For residential visits, the school will provide relevant allergy information to the venue and caterer in advance and will confirm that appropriate arrangements are in place before the visit takes place.

If a pupil's prescribed emergency medication is unexpectedly unavailable at the point of departure, the school will take immediate reasonable steps to obtain or recover the medication and assess whether the activity can proceed safely. A pupil will not automatically be excluded from the activity because of this; any decision not to proceed with the pupil's participation will be based on an individual assessment of the risks and circumstances and appropriately recorded.

Sport and Exercise

Prescribed medication required for allergy or asthma will be readily accessible during PE, sports activities, swimming and other forms of exercise, whether these take place on or off the school site. Staff responsible for the activity will be aware of the pupil's relevant healthcare arrangements and know how to access and use emergency medication where required.

Where exercise is a known trigger for a pupil's allergy or asthma, any additional precautions or support required will be set out in their Individual Healthcare Plan and/or relevant Action Plan.

Pupils with allergies will not be excluded from PE, sport or exercise solely because of their allergy where appropriate planning and reasonable adjustments can enable them to participate safely.

School Transport

Where transport is arranged or commissioned by the Trust or school, relevant allergy information and emergency arrangements will be considered as part of the planning process. Information will be shared with the transport provider where this is necessary, appropriate and lawful to support the pupil's safety.

The pupil's prescribed emergency medication must remain readily accessible during the journey and must not be stored in a location that would prevent it being accessed quickly in an emergency. Where appropriate, the responsible adult or supervising member of staff will ensure that they know where the medication is located and how to respond if the pupil experiences an allergic reaction.

15. Inclusion, wellbeing & emotional support

Living with an allergy can affect a pupil's confidence, participation, attendance and emotional wellbeing. Our schools are committed to ensuring that allergy management does not become a barrier to education, friendships or wider participation in school life.

Pupils with allergies should not be unnecessarily segregated from their peers at mealtimes or excluded from activities. Where an individual pupil requires specific arrangements or adjustments, these will be based on their needs and any identified risks and will be agreed and documented as appropriate.

Staff should listen to pupils when they express concerns about whether food, an activity or an environment is safe. A pupil raising a concern about their allergy should be taken seriously and supported to follow the arrangements in place, rather than being viewed as difficult or overly cautious.

Where allergy-related anxiety or concerns are affecting a pupil's wellbeing, participation or attendance, appropriate pastoral support will be provided. This may include regular check-ins, reassurance and working with the pupil and their parents or carers to identify ways to support their confidence and participation.

Allergy-related bullying, threats, deliberate contamination or deliberate exposure to a known allergen will be taken seriously and addressed in accordance with the Trust's Anti Bullying and Safeguarding policies.

Following a serious allergic reaction or near miss, the school will consider the support needed by the pupil and their family, as well as any pupils, staff or other individuals affected by the incident or involved in the response. The school will also review the circumstances of the incident and any learning that may help to reduce future risk.

Where a severe allergy meets the definition of a disability under the Equality Act 2010, the school will meet its duties to prevent discrimination and make reasonable adjustments. Regardless of whether the legal definition of disability is met, the Trust will seek to provide appropriate medical support and proportionate measures to help pupils with allergies access education and participate fully in school life.

16. Serious incident, Near Miss & Learning

All allergic reactions, suspected reactions, medication administrations, medication errors, allergen exposures and near misses will be recorded promptly and in accordance with the school's reporting procedures. Records will include, where known, what happened, the suspected or known trigger, symptoms, the location and time of the incident, actions taken and medication administered, the staff involved, any emergency or medical intervention, communications with parents or carers and any immediate learning identified.

The school will inform parents or carers of relevant incidents and notify the designated senior leader in accordance with local procedures. Significant incidents will be escalated through the Trust's established reporting and governance arrangements, with reports made to external agencies where there is a statutory or other legal requirement to do so.

Food safety concerns will be raised with the catering provider and, where appropriate, the relevant food safety authority.

Where applicable, serious incidents will also be managed in accordance with the Trust's safeguarding, health and safety, reporting, insurance and other relevant procedures, including RIDDOR requirements where the reporting criteria are met.

Incident reviews will take a proportionate, supportive and learning-focused approach. They will consider the pupil's and family's account, whether the relevant plans and control measures were followed, the availability and accessibility of emergency medication, the speed and effectiveness of the response, staff training and communication, and any wider organisational or environmental factors that may have contributed to the incident.

Where learning or improvement actions are identified, these will be clearly recorded, allocated to a named person and given an appropriate timescale for completion. Completion of actions will be monitored. Where necessary, the pupil's Individual Healthcare Plan, risk assessment, allergy arrangements, staff training, equipment or this policy will be reviewed and updated to reflect the learning.

Where an allergic incident raises concerns regarding neglect, failure to provide essential medication, repeated failures to follow agreed arrangements or deliberate exposure to allergens, the matter will be considered under the Trust's safeguarding procedures.

17. Training & Allergy Awareness

The Trust will ensure that appropriate allergy awareness and emergency response training is provided to staff so that they have the knowledge and confidence to recognise allergic reactions, reduce foreseeable risks and respond promptly to an emergency. Training will be provided at least annually and will form part of the induction arrangements for new staff.

All staff who are present when pupils are on the school site will receive allergy awareness training. This will include permanent, temporary, supply, agency and peripatetic staff, regular volunteers, catering staff and staff involved in breakfast, lunchtime, after-school or other pupil-facing provision. Arrangements will be in place to ensure that staff providing cover or joining the school during the year receive the necessary training.

Training will include an understanding of allergy and the different conditions and triggers that may affect pupils, including food allergy, asthma, eczema and hay fever. Staff will understand the difference between food allergy, coeliac disease and food intolerance, know how to access information about individual pupils and their known allergens, and be able to recognise the signs and symptoms of an allergic reaction and anaphylaxis.

Staff will also be trained in the school's emergency procedures, including how to locate and administer prescribed emergency medication and, where appropriate, spare adrenaline auto-injectors. They will understand when to call emergency services, how to access and follow a pupil's Allergy or Asthma Action Plan, and the importance of acting promptly without sending a pupil to seek help or medication themselves.

Training will also cover staff responsibilities for reducing the risk of allergen exposure, supporting pupils' wellbeing and inclusion, and reporting allergic reactions, medication errors, exposures and near misses. Staff will be familiar with the Trust's Allergy Safety Policy and understand their individual responsibilities in keeping pupils with allergies safe.

Staff who have specific responsibilities for supporting an individual pupil, including those who may be required to administer medication, will receive any additional training or competency assessment required by the pupil's Individual Healthcare Plan or relevant clinical advice. General allergy awareness training does not replace any separate clinical training, competency or governance arrangements that may be required for individual healthcare needs.

The school will maintain appropriate records of allergy training and monitor completion to ensure that relevant staff remain up to date. Training will be refreshed sooner where there is a significant change in a pupil's needs, following a serious incident or near miss, or where monitoring identifies a need for additional training.

External organisations and contracted providers are responsible for ensuring that their employees are appropriately trained for their roles. The school will provide relevant site-specific allergy information and explain its emergency procedures to external staff working on site, ensuring that arrangements for sharing essential information and responding to emergencies are clear.

18. Data Protection

healthcare needs in accordance with the UK General Data Protection Regulation (UK GDPR), the Data Protection Act 2018 and the Trust's data protection policies and procedures.

Information about a pupil's allergies, medical conditions, prescribed medication, treatment and emergency healthcare arrangements constitutes health data and is therefore special category personal data. The Trust and its schools will ensure that such information is processed lawfully, fairly and transparently, with an appropriate lawful basis under Article 6 of the UK GDPR and a relevant condition for processing special category data under Article 9, together with any additional requirements of the Data Protection Act 2018.

Personal information will be collected and used only where necessary to identify and manage allergy-related risks, provide appropriate care, implement Individual Healthcare Plans and respond effectively to emergencies. Information will be accurate, kept up to date and retained only for as long as necessary in accordance with the Trust's retention arrangements.

Access to allergy information will be restricted to staff and other authorised individuals who need it to fulfil their responsibilities for the pupil's safety and care. Information will be stored securely, whether electronically or in paper form, and handled in a way that protects pupils' privacy and confidentiality.

Relevant information will be shared with appropriate staff, including supply staff and those providing catering, lunchtime, breakfast, after-school or other activities, where necessary to manage risks and respond to an emergency. Information may also be shared with healthcare professionals, emergency services or other relevant agencies where necessary and lawful. Any information shared will be limited to what is relevant and proportionate to the purpose. The school will not allow data protection considerations to prevent the timely sharing of essential information needed to protect a pupil's health or safety.

Parents and carers, and pupils where appropriate, will be provided with clear information about how their personal data is used through the school's privacy notice and other relevant communications. Any requests to access or amend personal information, concerns about confidentiality or suspected personal data breaches will be managed in accordance with the Trust's data protection procedures, with advice sought from the Data Protection Officer where necessary.

All staff must maintain the confidentiality of pupils' allergy and healthcare information and follow the Trust's data protection and information-sharing requirements. Confidentiality must be balanced with the need to ensure that those responsible for a pupil's care and safety have the information they need to protect them effectively.

19. Monitoring, assurance, publication & review

The Trust and its schools will monitor the implementation and effectiveness of allergy safety arrangements to ensure that statutory requirements are met and that pupils with allergies are supported safely and inclusively.

Monitoring and assurance

- Each school will maintain oversight of its allergy safety arrangements, including individual healthcare plans, allergy and asthma action plans, emergency medication, staff training, risk assessments and incident records.
- Allergy-related incidents, near misses and medication errors will be recorded, reviewed and used to identify learning and opportunities to strengthen practice.
- The Trust will seek appropriate assurance from schools that allergy safety arrangements are being implemented effectively and that any identified actions are completed.
- Significant incidents, emerging risks or concerns about the effectiveness of allergy arrangements will be escalated through the Trust's established reporting and governance arrangements.
- Monitoring and assurance activity will be proportionate and may include review of school records, training compliance, medication checks, incident data, audits and school self-assessment.

Publication

The school's allergy safety policy will be made publicly available, including through the school and Trust website. The policy and relevant allergy safety arrangements will be brought to the attention of pupils, parents and carers and people working at the school, including staff, volunteers and other relevant adults.

Schools will ensure that information provided to families and staff is clear, accessible and sufficient to explain how allergy safety is managed within the school, while maintaining appropriate confidentiality in relation to individual pupils.

<https://hcat.uk/>

Review

The Trust Allergy Safety Policy and each school's allergy safety policy will be reviewed at least annually and updated sooner where there are significant changes to legislation, statutory guidance, national advice, school arrangements or learning arising from incidents and near misses.

The annual review will consider:

- whether the policy remains compliant with current legislation and statutory guidance;
- whether local allergy safety arrangements are effective and understood by staff;
- staff training and competency;
- the availability, storage and checking of emergency medication;
- the effectiveness of individual healthcare and allergy action plans;
- incidents, near misses and learning;
- feedback from pupils, parents, staff and relevant healthcare professionals; and
- any changes in the school environment, activities, catering arrangements or identified risks.

Any actions arising from the review will be recorded, assigned to an appropriate person and monitored through to completion.

Appendix 1

School implementation schedule

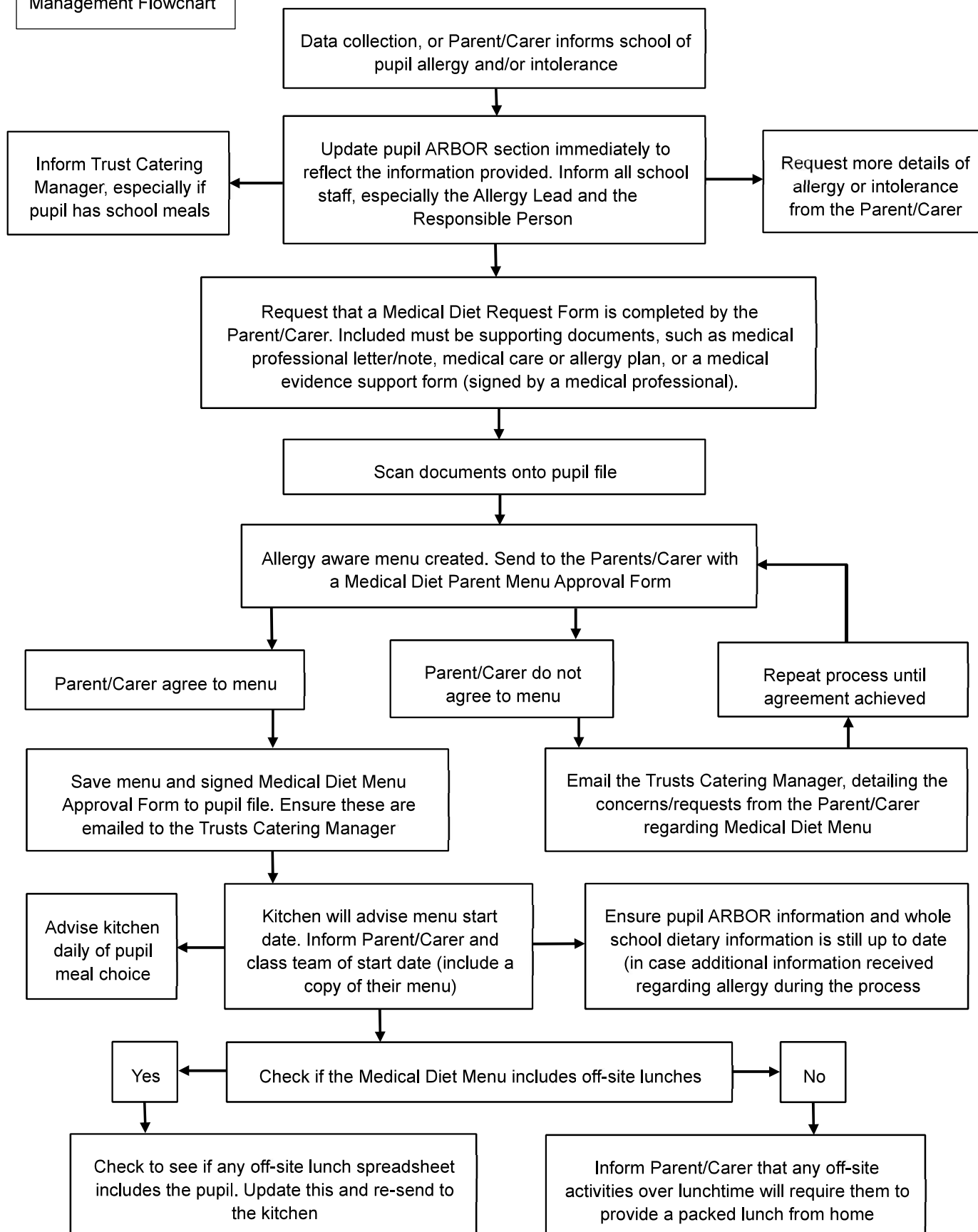
The school must complete this schedule and review it at least annually, and whenever there are material changes to staffing, site arrangements, catering provision or pupil needs.

School	
Headteacher	
Allergy Safety Lead (SLT)	
Deputy Safety Lead	
Named staff responsible for monthly spare AAI checks	
Allergy Register	
IHP/Action Plan storage/access	
Prescribed medication storage	
Spare AAI storage points	
Number of 'Spare' AAI 150 microgram, including expiry date.	
Number of 'Spare' AAI 300 microgram, including expiry date.	
Emergency asthma inhaler (if held)	
Catering Manager	Debbie Woolway
Clinical Waste/sharps disposal arrangements	
First Aid/Emergency response point	
Training provider	
Trust Incident escalation	Executive Team

Minimum contents of an emergency anaphylaxis kit

- ⇒ a clearly labelled pair of in-date spare AAIs of the appropriate dose;
- ⇒ device-specific instructions and a simple emergency response prompt;
- ⇒ an emergency asthma reliever inhaler and compatible spacers, where the
- ⇒ school holds these;
- ⇒ a list of pupils for whom consent and clinical confirmation permit use of the
- ⇒ spare AAI, where required by current rules;
- ⇒ a check log and replacement/escalation details; and
- ⇒ appropriate arrangements for safe handling of a used device

Appendix 2
Management Flowchart



Appendix 3

The Management System

Category	Dietary Needs
1	Pupils with severe allergies requiring emergency treatment and/or emergency rescue medication.
2	Pupils who have mild to moderate allergies.
3	Pupils who have food intolerances.
4	Pupils with dietary preferences based on religious/ethical beliefs.
5	Pupils who have dietary preferences.

Appendix 4

ALLERGY AND INTOLERANCE NOTIFICATION FORM

Pupil Name:

Class:

What is an allergy?

Allergies occur when the body's immune system reacts to a substance as though it is harmful. It causes a release of histamine and other substances into the body. A reaction usually occurs within a few minutes of eating the offending food. In severe cases, allergic reactions can be life threatening.

What is an intolerance?

A food intolerance is a difficulty digesting certain foods and have an unpleasant physical reaction e.g. bloating and tummy pain. The symptoms usually occur a few hours after eating the food. A child might only need to have eaten a small amount to have a reaction.

Please tick the relevant boxes below:

Substance	Allergy	Intolerance
Celery		
Cereals containing gluten		
Crustaceans (e.g. shrimp, lobster etc)		
Eggs		
Fish		
Lupin		
Milk/Dairy Products		
Molluscs		
Mustard		
Nuts		
Sesame		
Soya		
Sulphites		
Tree Nuts		
Any other food/drink- please state:		

Dietary Preferences - please tick the relevant boxes below:

Vegan	
Vegetarian	
Pescatarian	
Halal	
Kosher	
No Halal	
No Beef	
No Pork	
No Gelatine	
Other – State:	

Parent/Carer Name:

Signature:

Date:

If your child has no known food allergies/intolerances

If your child has no known food allergies/intolerances, please sign the below declaration:

I (insert name) declare that my child.

(insert name) has no known food allergies or intolerances.

I will also update the school immediately if my child develops a food allergy/ intolerance.

Signed

Date

Appendix 5

Allergy Management Risk Assessment for Individual Pupils

This form should be completed by the school in liaison with the Parents/Carer and the pupil if appropriate. It should be shared with everyone who has contact with the pupil. It should be read alongside the pupils Individual Health Plan (IHP) that has been produced by the Allergy Lead. A whole school approach is recommended in the management of allergy which would involve all staff to have awareness training in addition to key staff having adrenaline autoinjector (AAI) training.

Child/Young person: Click or tap here to enter text.	Date of Birth: Click or tap here to enter text.
Setting/School: Click or tap here to enter text.	Higher Level Teaching Assistant/Key Worker: Click or tap here to enter text.
Allergies: Click or tap here to enter text. Are reactions: Ingestion Click or tap here to enter text. Direct contact: Click or tap here to enter text. Indirect contact: Click or tap here to enter text.	
G.P: Name: Click or tap here to enter text. Phone number: Click or tap here to enter text.	Clinic/Hospital: Name: Click or tap here to enter text. Phone number: Click or tap here to enter text.
Date: Click or tap here to enter text.	Review date: Click or tap here to enter text.
Who is responsible for providing support in school: Click or tap here to enter text.	
People involved in writing this plan: Click or tap here to enter text.	
Signatures: Headteacher: Date: Click or tap here to enter text. Office Manager : Date: Click or tap here to enter text. Young person: Date: Click or tap here to enter text. I give permission for this risk assessment to be shared with anyone who needs this information to keep my child/young person safe. I give permission for my child's photograph to be displayed sensitively to keep my child safe. I understand that, in an emergency where anaphylaxis is suspected, the school may use a spare AAI to provide emergency treatment in accordance with current legislation and guidance. Parents: Date: Click or tap here to enter text.	

Complete this risk assessment in discussion with the parent/guardian, student if appropriate and medical professional if available. Consider all situations that the student may be in and agree control measures. Use the risk analysis tool at the end of the document to assess probability and impact producing further control measures if necessary. This is intended to be dynamic document and should be updated annually or after an incident or near miss.

Can the student recognise a reaction for themselves?

What have been the symptoms of previous reactions?

What are the hazards for each activity?	What are you already doing to control the risks?	Probability	Impact
---	--	-------------	--------

Medication:

Storage:

- Location of student's medication
- Location of generic 'spare' AAI

Food and drink:

Break time snacks including drinks

Lunch time:

- Hot meals
- Sandwiches
- Drinks

Events involving food: • Cake sales • Parties • PTA events • Drinks			
Celebrations: e.g. • Birthdays • Easter • Christmas			
Curriculum activities:			
Cooking:			

Creative activities: e.g. • Modelling dough • Papier-mâché • Clean cardboard (avoid egg cartons, milk cartons or cereal boxes) • Pasta • Latex-free collages			
Music: • Instrument sharing (cross contamination issue)			
Science activities:			
PE: • Indoor • Outdoor			
Playtime: • Playground • Field			
Offsite activities:			

- Curriculum visitors - Day trips - Residential visits - Sporting fixtures			
Other:			

This must be completed for any activity that is Medium with the aim of bringing the risk LOW. Activities that are High or Extreme must not happen unless action can be implemented to bring the risk down to LOW.						
Hazard	What further action do you need to take to control the risk/s?		Who needs to carry out this action?		When is the action needed by?	Completed
Consequence		Minor	Moderate	Major	Critical	Catastrophic
Likelihood	Rare	Low	Low	Low	Low	Low
	Unlikely	Low	Low	Medium	Medium	Medium
	Possible	Low	Medium	Medium	High	High

	Likely	Medium	Medium	High	High	Extreme
	Certain	Medium	Medium	High	Extreme	Extreme
Consequence		Minor	Moderate	Major	Critical	Catastrophic
This is the impact of the action being allowed to happen		No reaction	Non anaphylactic reaction	Emergency response required, ambulance and hospital	Emergency response required, ambulance and hospital	Fatal, Death
Likelihood		Definition				
Rare		May occur in exceptional circumstances				
Unlikely		Could occur in some circumstances - surprised if happened				
Possible		Possible or likely to occur in most circumstances				
Likely		Will occur in most circumstances				
Certain		It is expected to occur - inevitable				

Appendix 6

MEDICAL DIET REQUEST FORM

Please complete all parts of this request form in full or your application will not be processed. If you require assistance with understanding or completing this form, please contact the school for assistance.

If your child has a dietary requirement but does not require an adapted medical diet menu supported by the schools catering team, then there is no need to complete this request form.

Allergen reports, declaring the presence of the 14 mandatory Food Information regulations, allergens and nutrient counts (including carbohydrates, protein and fat) are available from the Trusts Catering Manager. Please ask the school's catering team should you require a copy.

Part A: Medical Diet Information (to be completed by the Parent/Carer)	
Child's First Name:	Child's Surname:
Child's Date of Birth:	Child's School Year Group:
Parent/Carer Name:	Parent/Carer Phone Number:
Parent/Carer Email:	
School Name:	
School Address:	Postcode:

Medical Diet (please tick all that apply):

- | | | | |
|--|-----------------------------------|----------------------------------|------------------------------------|
| ☐ Celery | ☐ Fish | ☐ Mustard | ☐ Soya |
| ☐ Cereals containing Gluten | ☐ Lupin | ☐ Nuts | ☐ Sulphites |
| ☐ Crustaceans | ☐ Milk | ☐ Peanuts | |
| ☐ Eggs | ☐ Molluscs | ☐ Sesame | |

Other allergens:

- | | | | |
|------------------------------------|-----------------------------------|---------------------------------------|-------------------------------------|
| ☐ Bananas | ☐ Coconuts | ☐ Oranges | ☐ Tomatoes |
| ☐ Beans | ☐ Kiwis | ☐ Peas | ☐ Pineapples |
| ☐ Chickpeas | ☐ Lentils | ☐ Strawberries | |

Other Allergy or Other Food Requirement (please print below)

- ☐ My child requires an autoinjector AAI (e.g. EpiPen) for their medical diet (please tick if this applies)

My child also requires their medical diet to be (please tick all the boxes that apply):

- | | | | | |
|-------------------------------------|--------------------------------|------------------------------------|------------------------------------|--------------------------------|
| ☐ Vegetarian | ☐ Vegan | ☐ Pork Free | ☐ Beef Free | ☐ Halal |
|-------------------------------------|--------------------------------|------------------------------------|------------------------------------|--------------------------------|

Part B: Supporting Documentation (to be provided by the Parent/Carer)

1

I confirm that I am attaching medical evidence confirming the medical diet requested in part A (please tick one or more as appropriate):

- ☐ Doctor/Dietitian letter or note
- ☐ Other medical professional letter or note
- ☐ Professional medical care plan
- ☐ Medical evidence support form

2

Please attach a recent colour passport style photograph of your child for identification purposes.

PLEASE
ATTACH
PHOTO OF
CHILD
(STUDENT)
HERE

Part C: Terms and Conditions

By completing this medical diet request form, parents/carers are consenting for an adapted medical diet menu to be prepared for their child and for their child to be identified as having a dietary requirement in accordance with the identification system operated at the school. The medical diet menu will continue until the school are notified in writing otherwise. You will receive a copy of the medical diet menu and are required to notify any discrepancies immediately.

The school can provide a jacket potato with a suitable topping from the date of receipt of a medical diet request until the date a medical diet menu has been confirmed for a child. Otherwise, pupils must provide a packed lunch meal as an interim measure. The school reserve the right to decline a medical diet request if a risk assessment considers the medical risk too high, or the request process is not completed in full (for example; if sufficient medical evidence is provided). In these circumstances, the school may refuse to provide any diet to the student.

The school will process the personal data you have supplied in accordance with UK data protection legislation. Information will be retained in accordance with the Trust's Data retention schedule.

Please read the school's (Trust's) full Allergy Policy via one of the following:

- Online- <https://tobeconfirmed.co.uk>
- Email – an electronic copy in PDF format
- Printed- paper copy – to be collected from the front office of the school by parent/carers

I consent to the school processing this personal data for the purpose of providing a medical diet and I confirm that I have read and understood the above.

Parent/Carer Name:

Signature:

Date:

Appendix 7

MEDICAL DIET APPROVAL FORM

Please ensure that all sections of this approval form are completed in full. Incomplete forms may result in your application not being processed.

If you require assistance in understanding or completing this form, please contact the school, where staff will be happy to help.

Should your child's dietary requirements, allergies, or medical needs change at any time, it is the responsibility of the Parent/Carer to notify the school immediately in writing.

Parents/carers are responsible for notifying the school promptly of any changes to a pupil's allergy or dietary needs. Failure to provide updated information may limit the school's ability to implement appropriate support arrangements.

Part A: Medical Diet Approval (to be completed by the Parent/Carer)

Child's First Name:	Child's Surname:
Child's Date of Birth:	Child's School Year Group:
Parent/Carer Name:	Parent/Carer Phone Number:
Parent/Carer Email:	
School Name:	
School Address:	Postcode:

Part B: Terms and Conditions

By signing the Medical Diet Approval Form, parents/carers agree and consent for an adapted medical diet menu to be prepared for their child as identified on the Medical Diet Request Form they completed and submitted. The medical diet menu will continue until the school are notified in writing otherwise. You will receive a copy of the medical diet menu and are required to notify any discrepancies immediately.

Where the school is unable to safely provide a requested medical diet, the Trust will work with parents/carers and relevant professionals to identify alternative arrangements that enable the pupil to access education safely and without discrimination. The school will process the personal data you have supplied in accordance with UK data protection legislation. We will keep this personal data for no longer than is necessary, and at most for 3 years after they leave the school named on this form.

Please read the school's (Trust's) full Allergy Safety Policy via one of the following:

- Online- <https://tobeconfirmed.co.uk>
- Email – an electronic copy in PDF format
- Printed- paper copy – to be collected from the front office of the school by parent/carers

I consent to the school and Trust processing the personal data provided for the purpose of assessing and administering a medical diet for my child.

I confirm that the information supplied on the Medical Diet Request Form is accurate, complete, and up to date to the best of my knowledge.

I confirm that I have read, understood, and agree to the information and conditions set out above.

Parent/Carer Name:

Signature: Date: