BURLINGTON JUNIOR SCHOOL



Allergen and Anaphylaxis Policy

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Statement of intent

Burlington Junior School strives to ensure the safety and wellbeing of all members of the school community. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school. In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The school does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

1. Legal framework

- 1.1. This policy has due regard to legislation and government guidance including, but not limited to, the following:
 - Children and Families Act 2014
 - The Human Medicines (Amendment) Regulations 2017
 - The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
 - Department of Health (2017) 'Guidance on the use of adrenaline autoinjectors in schools'
 - DfE (2015) 'Supporting pupils at school with medical conditions'
 - DfE (2023) 'Allergy guidance for schools'
- 1.2. This policy will be implemented in conjunction with the following school policies and documents:
 - Health and Safety Policy

Whole-school Food Policy

- Medical Policy
- Medical Conditions Policy

Animals in School Policy

• School journeys Policy

Allergen and Anaphylaxis Risk Assessment

- Sims
- Medical Care Plans folder
- Staff Personnel folder
- Register of Epipens Medical folder on shared drive

2. Definitions

For the purpose of this policy:

- 2.1. **Allergy** is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.
- 2.2. **Allergen** is a normally harmless substance that triggers an allergic reaction for a susceptible person.

- 2.3. **Allergic reaction** is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:
 - Hives
 - Generalised flushing of the skin
 - Itching and tingling of the skin
 - Tingling in and around the mouth
 - Burning sensation in the mouth
 - Swelling of the throat, mouth or face
 - Feeling wheezy
 - Abdominal pain
 - Rising anxiety
 - Nausea and vomiting
 - Alterations in heart rate
 - Feeling of weakness
- 2.4. **Anaphylaxis** is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:
 - Persistent cough
 - Throat tightness
 - Change in voice, e.g. hoarse or croaky sounds
 - Wheeze (whistling noise due to a narrowed airway)
 - Difficulty swallowing/speaking
 - Swollen tongue
 - Difficult or noisy breathing
 - Chest tightness
 - Feeling dizzy or feint
 - Suddenly becoming sleepy, unconscious or collapsing
 - Becoming pale or floppy
 - Difficulty breathing
 - Feeling faint
 - Reduced level of consciousness
 - Lips turning blue
 - Collapsing
 - Becoming unresponsive
- 2.5 **Epipen -** Brand name for syringe style device containing the drug Adrenalin, which is ready for immediate inter-muscular administration.

3. Roles and responsibilities

The governing board is responsible for:

- Ensuring that policies, plans, and procedures are in place to support pupils with allergies and those who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities and minimise risks.
- Ensuring that the school's approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual pupil.
- Ensuring that staff are properly trained to provide the support that pupils need, and that they receive allergy and anaphylaxis training at least annually.
- Monitoring the effectiveness of this policy and reviewing it every four year, and after any incident where a pupil experiences an allergic reaction.
 - 3.1. The Head Teacher is responsible for:
 - The development, implementation and monitoring of the Allergen and Anaphylaxis Policy.
 - Ensuring that parents are informed of their responsibilities in relation to their child's allergies.
 - Ensuring that all school trips are planned in accordance with the School Journey Policy, taking into account any potential risks the activities involved pose to pupils with known allergies.
 - Ensuring that the <u>Whole-School Food Policy</u> and the associated protocols are effectively implemented, including those in relation to labelling foods that may contain common allergens, e.g. nuts. This also applies to policies held by Radish, our catering company, and associated risk assessments.
 - Ensuring that all designated first aiders are trained in the use of Epipens and the management of anaphylaxis.
 - Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
 - Ensuring that catering staff are aware of, and act in accordance with, the school's policies regarding food and hygiene, including this policy.
 - Ensuring that catering staff are aware of any pupils' allergies which may affect the school meals provided.
 - 3.2. The School Leadership Team (SLT) is responsible for:
 - Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff. The School Office Team is responsible for:
 - Seeking up-to-date medical information about each pupil via a medical form sent to parents on an annual basis, including information regarding any allergies.
 - Contacting parents for required medical documentation regarding a child's allergy.
 - Ensuring that the necessary staff members are informed about pupils' allergies.

- Understanding the action to take and processes to follow in the event of a pupil going into anaphylactic shock, and ensuring that this information is passed onto staff members.
- 3.3. All relevant staff members are responsible for:
 - Acting in accordance with the school's policies and procedures at all times.
 - Attending relevant training regarding allergens and anaphylaxis.
 - Being familiar with and implementing pupils' Individual Healthcare Plans (IHPs) as appropriate.
 - Responding immediately and appropriately in the event of a medical emergency.
 - Reinforcing effective hygiene practices, including those in relation to the management of food.
 - Promoting hand washing before and after eating.
 - Monitoring all food supplied to pupils by both the school and parents, including snacks, ensuring food containing known allergens is not provided.
 - Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
 - Ensuring that any necessary medication are out of the reach of pupils but still easily accessible to staff members.

Liaising with the SBM and pupils' parents to ensure the necessary control measures are in place.

The kitchen manager is responsible for:

- Monitoring the food allergen log and allergen tracking information for completeness.
- Reporting any non-conforming food labelling to the supplier, where necessary.
- Ensuring the practices of kitchen staff comply with food allergen labelling laws and that training is regularly reviewed and updated.
- Recording incidents of non-conformity, either in allergen labelling, use of ingredients or safe staff practice, in an allergen incident log.
- Acting on entries to the allergen incident log and ensuring the risks of recurrence are minimised.

Kitchen staff are responsible for:

- Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with this policy, and the processes for identifying pupils with specific dietary requirements.
- Ensuring they are fully aware of whether each item of food served contains any of the main 14 allergens, as is a legal obligation, and making sure this information is readily available for those who may need it.
- Ensuring that the required food labelling is complete, correct, clearly legible, and is either printed on the food packaging or attached via a secure label.

- Reporting to the kitchen manager if food labelling fails to comply with the law.
- 3.4. All parents are responsible for:
 - Notifying the school office team of the following information:
 - Their child's allergens
 - The nature of the allergic reaction
 - What medication to administer
 - Specified control measures and what can be done to prevent the occurrence of an allergic reaction
 - Keeping the school up-to-date with their child's medical information.
 - Providing written consent for the use of a spare Epipen.
 - Providing the school with up-to-date emergency contact information.
 - Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.
 - Providing the school with any necessary medication, in line with the procedures outlined in the <u>Medical Conditions Policy</u>.
 - Communicating to the school any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen.
 - Providing the school, in writing, any details regarding the child's allergies.
 - Working alongside the SENCO to develop an IHP to accommodate the child's needs, as well as undertaking the necessary risk assessments.
 - Signing their child's IHP, where required.
 - Acting in accordance with any allergy-related requests made by the school, such as not providing nut-containing items in their child's packed lunch.
 - Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
 - Providing a supply of 'safe' snacks for any individual attending school events.
 - Raising any concerns they may have about the management of their child's allergies with the SLT.
 - Ensuring that any food their child brings to school is safe for them to consume.
 - Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided.
- 3.5. All pupils are responsible for:
 - Ensuring that they do not exchange food with other pupils.
 - Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.

- Being proactive in the care and management of their allergies.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- Learning to recognise personal symptoms of an allergic reaction.
- Keeping necessary medications in an agreed location which members of staff are aware of.
- Developing greater independence in keeping themselves safe from allergens.
- Notifying a staff member if they are being bullied or harassed as a result of their allergies.

4. Food allergies

- 4.1. Parents will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.
- 4.2. Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service.
- 4.3. Where a pupil who attends the school has a nut allergy, the school's catering service will be requested to eliminate nuts, and food items with nuts as ingredients, from meals as far as possible, not including foods which are labelled 'may contain traces of nuts'.

When making changes to menus or substituting food products, the school will ensure that pupils' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible.

Where meals include allergens or traces of allergens, staff will use clear and fully visible labels, in line with this policy, to denote the allergens of which consumers should be aware.

The school will ensure that there are always dairy- and gluten-free options available for pupils with allergies and intolerances.

4.4. All food tables will be wiped down before and after being used.

- 4.5. Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.
- 4.6. There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products. Check with senior staff in kitchen.
- 4.7. Food items containing bread and wheat will be stored separately. Check with senior staff in kitchen.
- 4.8. Food items containing nuts will not be served at, or be bought onto, school premises.
 - 4.9. The chosen catering service of the school is responsible for ensuring that the school's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.
 - 4.10. Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

Food labelling

Food goods classed as 'pre-packed for direct sale' (PPDS) will clearly display the following information on the packaging:

- The name of the food
- The full ingredients list, with ingredients that are allergens emphasised, e.g. in bold, italics, or a different colour

The school will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded, upon delivery, in a food allergen log stored in the kitchen
- Allergen tracking will continue throughout the school's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a weekly basis by the kitchen manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident log and managed by the kitchen manager

Declared allergens

The following allergens will be declared and listed on all PPDS foods in a clearly legible format:

- Cereals containing gluten and wheat, e.g. spelt, rye and barley
- Crustaceans, e.g. crabs, prawns, lobsters
- Nuts, including almonds, hazelnuts, walnuts, cashews, pecan nuts, brazil nuts and pistachio nuts

- Celery
- Eggs
- Fish
- Peanuts
- Soybeans
- Milk
- Mustard
- Sesame seeds
- Sulphur dioxide and sulphites at concentrations of more than 10mg/kg or 10mg/L in terms of total sulphur dioxide
- Lupin
- Molluscs, e.g. mussels, oysters, squid, snails

The above list will apply to foods prepared on site, e.g. sandwiches, salad pots and cakes, that have been pre-packed prior to them being offered for consumption.

Kitchen staff will be vigilant when ensuring that all PPDS foods have the correct labelling in a clearly legible format, and that this is either printed on the packaging itself or on an attached label. Food goods with incorrect or incomplete labelling will be removed from the product line, disposed of safely and no longer offered for consumption.

Any abnormalities in labelling will be reported to the kitchen manager immediately, who will then contact the relevant supplier where necessary.

The kitchen manager will be responsible for monitoring food ingredients, packaging and labelling on a weekly basis and will contact the supplier immediately in the event of any anomalies.

Changes to ingredients and food packaging

The school will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

5. Animal allergies

- 5.1. The Animals in School Policy will be adhered to at all times.
- 5.2. Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.
- 5.3. In the event of an animal on the school site, staff members will be made aware of any pupils who this may pose a risk to and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

- 5.4. The school will ensure that any pupil or staff member who comes into contact with the animal washes their hands thoroughly to minimise the risk of the allergen spreading.
- 5.5. A supply of antihistamine tablets will be kept in the medical room in case of an allergic reaction.

6. Seasonal allergies

- 6.1. The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.
- 6.2. Precautions regarding the prevention of seasonal allergies include ensuring that grass within the school premises is not mown whilst pupils are outside.
- 6.3. Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.
- 6.4. Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.
- 6.5. Pupils will be encouraged to wash their hands after playing outside.
- 6.6. Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the site manager.
- 6.7. Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.
- 6.8. The site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.
- 6.9. Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

7. Adrenaline auto-injectors (Epipens)

- 7.1. Pupils who suffer from severe allergic reactions may be prescribed an Epipen for use in the event of an emergency.
- 7.2. For pupils who have prescribed Epipens, these are stored in a suitably safe and central location: the school office in the class medical box.
- 7.3. All Epipens will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

- 7.4. In line with manufacturer's guidelines, Epipens are stored at room temperature, protected from direct sunlight and extreme temperature.
- 7.5. Used Epipens may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with <u>section 12</u> of this policy.
- 7.6. A sharps bin is utilised where used or expired AAIs are disposed of on the school premises.
- 7.7. Where any Epipens are used, the following information will be recorded in the Accident book.
 - Where and when the reaction took place
 - How much medication was given and by whom

8. Medical attention and required support

- 8.1. Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents, the relevant class teacher, the school office team and any other relevant staff members, in which the pupil's allergies will be discussed and a plan of appropriate action/support will be developed.
- 8.2. All medical attention, including that in relation to administering medication, will be conducted in accordance with the Medical Policy and the Medical Conditions Policy.
- 8.3. Parents will provide the office with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.
- 8.4. Pupils will not be able to attend school or educational visits without any life-saving medication that they may have, such as Epipens.
 - 8.5. All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.
 - 8.6. Any specified support which the pupil may require is outlined in their IHP.
 - 8.7. All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's IHP.
 - 8.8. The SENCO is responsible for working alongside relevant staff members and parents in order to develop IHPs for pupils with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.
 - 8.9. The SENCO has overall responsibility for ensuring that IHPs are implemented, monitored and communicated to the relevant members of the school community.

- 8.10. The school holds a register of pupils to whom Epipens can be administered which includes the following:
 - Name of pupil
 - Class
 - Known allergens
 - Risk factors for anaphylaxis
 - Whether medical authorisation has been received
 - Whether written parental consent has been received
 - Dosage requirements
- 8.11. Parents are required to provide consent on an annual basis to ensure the register remains up-to-date.
- 8.12. Parents can withdraw their consent at any time. To do so, they must write to the Head Teacher.
- 8.13. The SBM checks the register is up-to-date on an annual basis.
- 8.14. The SBM will also update the register relevant to any changes in consent or a pupil's requirements.
- 8.15. Copies of the register are held in the school office, which are accessible to all staff members.

9. Staff training

- 9.1. All Teaching Assistants (TAs) and School Meal Supervision Assistants (SMSAs) will be trained in how to administer an Epipen (on a rolling program), and the sequence of events to follow when doing so.
- 9.2. In accordance with the <u>Medical Conditions Policy</u>, staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.
- 9.3. The school will arrange specialist training on an annual basis where a pupil in the school has been diagnosed as being at risk of anaphylaxis.
- 9.4. Designated staff members will be taught to:
 - Recognise the range of signs and symptoms of severe allergic reactions.
 - Respond appropriately to a request for help from another member of staff.
 - Recognise when emergency action is necessary.
 - Administer Epipens according to the manufacturer's instructions.
 - Make appropriate records of allergic reactions.
 - All TAs and SMSAs will: Be trained to recognise the range of signs and symptoms of an allergic reaction.
 - Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild-moderate symptoms.

• Understand that Epipens should be administered without delay as soon as anaphylaxis occurs.

10. In the event of a mild-moderate allergic reaction

- 10.1. Mild-moderate symptoms of an allergic reaction include the following:
 - Swollen lips, face or eyes
 - Itchy/tingling mouth
 - Hives or itchy skin rash
 - Abdominal pain or vomiting
 - Sudden change in behaviour
- 10.2. If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and call for help from the designated staff members able to administer Epipens via a walkie talkie.
- 10.3. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the Epipen.
- 10.4. If necessary, other staff members may assist the designated staff members with administering Epipens.
- 10.5. The pupil's parents will be contacted immediately if a pupil suffers a mildmoderate allergic reaction, and if an Epipen has been administered.
- 10.6. In the event that a pupil without a prescribed Epipen, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an Epipen should be administered. An Epipen will not be administered in these situations without contacting the emergency services.
- 10.7. For mild-moderate allergy symptoms, the Epipen will usually be sufficient for the reaction; however, the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.
- 10.8. Should the reaction progress into anaphylaxis, the school will act in accordance with <u>section 12</u> of this policy.
- 10.9. The School Office Team will refer any pupil who has been administered an Epipen to the hospital for further monitoring.

11. In the event of anaphylaxis

- 11.1. Anaphylaxis symptoms include the following:
 - Persistent cough
 - Hoarse voice
 - Difficulty swallowing, or swollen tongue

- Difficult or noisy breathing
- Persistent dizziness
- Becoming pale or floppy
- Suddenly becoming sleepy, unconscious or collapsing
- 11.2. In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor with their legs raised, and will call for help from a designated staff member.
- 11.3. The designated staff member will administer an Epipen to the pupil. Spare Epipens will only be administered if appropriate consent has been received.
- 11.4. Where there is any delay in contacting designated staff members, the nearest staff member will administer the Epipen.
 - 11.5. If necessary, other staff members may assist the designated staff members with administering Epipen.
 - 11.6. The emergency services will be contacted immediately.
 - 11.7. A member of staff will stay with the pupil until the emergency services arrive the pupil will remain lay flat and still.
 - 11.8. The Head Teacher will be contacted immediately, as well as a suitably trained individual, such as a first aider.
 - 11.9. If the pupil stops breathing, a suitably trained member of staff will administer CPR.
 - 11.10. If there is no improvement after five minutes, a further dose of adrenaline will be administered using another Epipen, if available.
 - 11.11. In the event that a pupil without a prescribed Epipen, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an Epipen should be administered. An Epipen will not be administered in these situations without contacting the emergency services.
 - 11.12. A designated staff member will contact the pupil's parents as soon as is possible.
 - 11.13. Upon arrival of the emergency services, the following information will be provided:
 - Any known allergens the pupil has
 - The possible causes of the reaction, e.g. certain food
 - The time the Epipen was administered including the time of the second dose, if this was administered
 - 11.14. Any used Epipen s will be given to paramedics.

- 11.15. Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.
- 11.16. Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.
- 11.17. A member of staff will accompany the pupil to hospital in the absence of their parents.
- 11.18. If a pupil is taken to hospital by car, two members of staff will accompany them.
- 11.19. Following the occurrence of an allergic reaction, the SLT, in conjunction with the SBM, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

12. School trips

The headteacher will ensure a risk assessment is conducted for each school trip to address pupils with known allergies attending. All activities on the school trip will be risk assessed to see if they pose a threat to any pupils with allergies and alternative activities will be planned where necessary to ensure the pupils are included.

The school will speak to the parents of pupils with allergies where appropriate to ensure their co-operation with any special arrangements required for the trip.

A designated adult will be available to support the pupil at all times during a school trip.

If the pupil has been prescribed an AAI, at least one adult trained in administering the device will attend the trip. The pupil's medication will be taken on the trip and stored securely – if the pupil does not bring their medication, they will not be allowed to attend the trip.

A member of staff will be assigned responsibility for ensuring that the pupil's medication is carried at all times throughout the trip.

Two AAIs will be taken on the trip and will be easily accessible at all times.

Where the venue or site being visited cannot assure appropriate food can be provided to cater for pupils' allergies, the pupil will take their own food or the school will provide a suitable packed lunch.

13. Monitoring and review

- 13.1. The Head Teacher is responsible for reviewing this policy every 4 years.
- 13.2. The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the Head Teacher immediately.

13.3. Following each occurrence of an allergic reaction, this policy and pupils' MCPs will be updated and amended as necessary.

MEDICATION ADMINISTRATION IN SCHOOL

Name of pupil	
Class	
Parent name & contact number	
Reason for medication to be in school including medical diagnosis	
Name of medication	
Dosage	
Time to be administered	
Self-administration Y/N	
Procedures to be taken in an emergency	
Start date	
End date	

Please note that Calpol and Nurofen can be kept in the office for your child but we will not call them for it. We will only remind those children with antibiotics.

The staff will not be held liable for missed medication.

Parent/guardian signature _____

Date _____

Allergy Declaration Form

Name of pupil:		
Date of birth:	Yea	r group:
Name of GP:		
Address of GP:		

Nature of allergy:	
Severity of allergy:	
Symptoms of an adverse reaction:	
Details of required medical attention:	
Instructions for administering medication:	
Control measures to avoid an adverse reaction:	