



Whole School Allergy Management Risk Assessment

The school should have an allergy policy which is monitored. Clear communication and procedures should be regularly communicated to all staff. Annual training is recommended when allergic students are on roll or when a student with an allergy joins the school.

Training is available from: <https://www.anaphylaxis.org.uk/allergywise/>

Policy is free to download: <https://www.anaphylaxis.org.uk/wp-content/uploads/2023/03/Model-Policy-for-allergy-at-school-v2-060323.pdf>

If this is required in an editable format, please download from the best practice resource section: <https://www.anaphylaxis.org.uk/education/safer-schools-programme/>

What are the hazards for each activity?	What are you already doing to control the risks?	Probability	Impact
Medication:			
<u>Storage:</u> Location of each student's medication Location of generic 'spare' AAI Consider: <ul style="list-style-type: none"> • is there consistency of container throughout the school to make it easily identifiable? • Is the student able to self carry their own medication? • Is the back up medication always within 5 mins of where the students are? Are multiple sites needed for back up medication? • Is the students and back up medication always accessible regardless of the time of day? 	Any pupils with an epi-pen have pens stored in an accessible location with their name clearly labelled on the box – red boxes in the classrooms All children with allergies requiring an epi-pen have a allergen plan that is updated by the school nurse team. Any pupils who have medicine e.g. piriton to manage allergies, medication is stored in the red box	If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,	Low
Training:			
Check that the course has medical input/review Training should be updated annually Ideally all staff would be trained. If this is decided against, a rationale based on risk assessment should be produced.	All staff are trained using the Sandwell School Nurse Team training annually	If measures are not in place then this could lead to a	Low



<p>Consider: Will there always be a member of staff available to administer an AAI throughout the school day who is not further than 5 minutes away from the student at any given point.</p> <p>Course must include:</p> <ul style="list-style-type: none"> • Signs and symptoms of allergy & anaphylaxis • Emergency response • Administration of adrenaline auto-injectors • Prevention of reactions <p>Ideally would include:</p> <ul style="list-style-type: none"> • Types of allergen: food and non-food • Curriculum • Trips & visits including sports • Reporting and recording <p>AllergyWise® for Schools is a low cost, CPD certified course that is clinically reviewed and assured to be up to date.</p>		<p>major incident. The control measures in place minimise the risk as far as practicably possible,</p>	
<p>Food and drink:</p>			
<p><u>Catering:</u></p> <ul style="list-style-type: none"> • What systems are in place to ensure that the student eats safely? Do all the catering and lunchtime staff know who has allergies and how to ensure that they are safe. Do they know how to report near misses and what to do should a reaction occur? • What measures do you have in place for liaison with the catering contractor and lunchtime supervisory staff? 	<p>All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.</p> <p>A copy of the school menu is sent out to all parents and can be viewed in school if requested.</p> <p>The school office and will inform the Catering Manager of pupils with food allergies. 'Educaterers' (catering provider) has a purple process folder in place for managing pupils with allergies.</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as</p>	<p>Low</p>



<ul style="list-style-type: none"> • Ensure up to date allergen information is available for each menu and that it is easily accessible, ideally on school website. • Make sure that any unexpected changes to the menu and allergens are communicated urgently to student/parent/guardian so that a different choice can be made. • Ensure that allergen matrix is available and kept up to date. The FSA have a free to download one: https://www.fooddocs.com/food-safety-templates/food-allergen-chart <p>Consider: wrap round care break times lunch times</p>	<p>Parents/carers are encouraged to meet with the Catering Manager to discuss their child's needs and complete a form on admission to school stating all known allergies that is shared with the catering provider.</p> <p>The school adheres to the following Department of Health guidance recommendations:</p> <ul style="list-style-type: none"> • Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended. • If food is purchased from the school canteen, parents should check the appropriateness of foods by speaking directly to the catering manager. • The pupil should be taught to also check with catering staff, before selecting their lunch choice. • Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager. • Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats). • Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age. 	<p>practically possible,</p>	
<p><u>Events involving food:</u> Cake sales Parties Other PTA events Drinks</p> <ul style="list-style-type: none"> • How can these be made inclusive? 	<p>Events e.g. film night or discos crisps and a drink are served that do not contain allergens. Crisps are checked to ensure they do not contain milk. At the event a list of children attending is given to staff and those identified with allergies are highlighted. Cross referencing is completed to ensure any food served can be given to the child.</p>	<p>If measures are not in place then this could lead to a major incident. The control</p>	<p>Low</p>



<ul style="list-style-type: none"> • What are the risks if the allergens are present during the events? Is handwashing possible? • What information has to be shared ahead of the event to remind all about the exclusion of an allergen if this has been agreed. Allergen Matrix can be found here: https://www.fooddocs.com/food-safety-templates/food-allergen-chart • Are allergens displayed, where appropriate to the event? 	<p>Parties – e.g. Christmas parties – class teachers know which children in their care have allergies and check the ingredients on packaging. Only packaged food is served. Alternatives are found for children who have allergies.</p> <p>End of term prizes – If selection boxes or Easter eggs are provided for raffles a suitable alternative is provided for any child who may win that has an allergy.</p>	<p>measures in place minimise the risk as far as practicably possible,</p>	
<p><u>Celebrations:</u></p> <ul style="list-style-type: none"> • Consider discouraging cake and sweets for children as treats both for birthdays and school celebrations. • Where food is used, consider the impact for the students with allergies and discuss with parent/carer/student at the earliest opportunity to plan for a safe and inclusive event. 	<p>Parties – e.g. Christmas parties – class teachers know which children in their care have allergies and check the ingredients on packaging. Only packaged food is served. Parents now provide own food. Alternatives are found for children who have allergies.</p> <p>End of term prizes – If selection boxes or Easter eggs are provided for raffles a suitable alternative is provided for any child who may win that has an allergy.</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,</p>	<p>Low</p>
<p>Curriculum activities:</p>			
<p><u>Cooking:</u></p> <ul style="list-style-type: none"> • Adapt recipes for all to create a safe cooking space. If a recipe cannot be adapted, can a different recipe be used? • Has the allergic student got their own set of cooking materials? 	<p>Cooking activities – all class teachers are aware of children’s allergies in their class and ensure that ingredients are checked and that an alternative is provided if needed so all children are included.</p>	<p>If measures are not in place then this could lead to a major incident. The</p>	<p>Low</p>



<ul style="list-style-type: none"> • Are allergies included in the food technology curriculum so that all students have awareness of the impact of allergies to the health of the allergic person. • Are all students made aware of the impact of their actions on an allergic person should the specific allergens not be excluded? • Are all students taught about cross contamination and the impact of this? 		control measures in place minimise the risk as far as practicably possible,	
<p><u>Creative activities: e.g. junk modelling, pasta</u></p> <ul style="list-style-type: none"> • When using packaging ensure that the allergens have not been in those packets; for example: crunchy nut cornflakes should not be in a classroom where a student has a peanut allergy. When students are bringing in materials from home, ensure that communication is sent to parent/carers to specify what they are unable to bring in and monitor this when the packaging comes into school. • Plastic containers should be washed in hot soapy water to remove allergens. 	<p>Creative activities - all class teachers are aware of children's allergies in their class and ensure that ingredients are checked and that an alternative is provided if needed so all children are included.</p>	If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,	Low
<p><u>Music: instrument sharing (cross contamination issue)</u></p> <ul style="list-style-type: none"> • Do instruments have to be shared? • Do blowing percussion instruments have to be shared? How can they be sterilised if they do? Can the allergic student have their own blowing instrument that they don't need to share? 	<p>Blown musical instruments would be sterlised after use.</p>	If measures are not in place then this could lead to a major incident. The control measures in	Low



		place minimise the risk as far as practicably possible,	
<u>Science activities:</u> <ul style="list-style-type: none"> Review the science curriculum and see where allergens are used. Consider whether these have to be used and whether there are alternates that can be used? If essential, the activity needs to be individually risk assessed for the allergic student. How can that lesson be made inclusive and safe? Consider the impact of cross contamination and whether this could cause a reaction for the allergic student. 	Science activities - all class teachers are aware of children's allergies in their class and ensure that ingredients are checked and that an alternative is provided if needed so all children are included.	If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,	Low
<u>PE:</u> Consider: Indoor Outdoor Forest Schools <ul style="list-style-type: none"> Where emergency medication is kept during PE and how quickly it can be accessed. If it is left in the classroom/changing room and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? Is there an allergy trained member of staff present during after school clubs? 	P.E activities - all class teachers are aware of children's allergies in their class and ensure that ingredients are checked and that an alternative is provided if needed so all children are included.	If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,	Low



<ul style="list-style-type: none"> Is there an allergy trained member of staff accompanying away sporting events? 			
<p><u>Break time:</u> Consider:</p> <p>Playground Field</p> <ul style="list-style-type: none"> Where emergency medication is kept during breaktimes and how quickly it can be accessed. If it is left in the classroom and is needed, how quickly can it be found? Is it easily identifiable and can it be with the student within 5 mins? Is there an allergy trained member of staff present during break times? 	<p>The school site is within 5 minutes of medication and/or AAls</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,</p>	<p>Low</p>
<p>School animals:</p>			
<p>Consider:</p> <p>Therapy dogs and the access they have to children with allergies. Is there an allergen free area that the student will be safe in? We have Dogs in School guidance that will assist with this section.</p>	<p>Children with allergies are identified and staff made aware if animals are in school. Steps are in place to ensure the school is still inclusive to the needs of the child whilst managing the allergy.</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,</p>	<p>Low</p>
<p>Visitors & supply staff:</p>			



<p>Consider:</p> <ul style="list-style-type: none"> • Has the visitor been made aware of the school's policy? • If there is an allergy free zone that has been created due to a student's individual risk assessment, how has this been communicated to the visitor/supply staff? • Does the visitor need to know about the student's allergy? Will they be using the student's allergen? Do they need to know they have to have eliminated cross contamination from themselves through handwashing after eating? 	<p>Visitors are made aware of school policy</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,</p>	<p>Low</p>
<p>Offsite activities:</p>			
<p><u>Day trips:</u> Consider:</p> <ul style="list-style-type: none"> • Is there a specific allergy section on the visit/experience risk assessment? • Is there an allergy trained member of staff accompanying the visit? • Storage of AAI's • Availability of emergency services and nearest hospital • Is there a good phone signal? If not, how will communication work? How will emergency services be called? • Is food being taken or served? It may be necessary to request that other students do not bring specific allergens on the trip to reduce risk during the day. Communication with venues and parent/carers to set out expectations. 	<p>EVOLVE risk assessments are completed for all visits and staff sign to say they have read the relevant risk assessments before attending a visit. All school trips are lead by a trained visit leader.</p>	<p>If measures are not in place then this could lead to a major incident. The control measures in place minimise the risk as far as practicably possible,</p>	<p>Low</p>



<ul style="list-style-type: none"> • Are any of the activities during the day high risk to the allergic student; inform venues and agree control measures, aim for inclusivity. <p><u>Residential visits including D of E:</u> Consider:</p> <ul style="list-style-type: none"> • Storage of AAI for each activity being undertaken & overnight • Availability of emergency services and nearest hospital • Is there a good phone signal? If not, how will communication work? How will emergency services be called? • What food is being served? Consider cross contamination. Do any menu changes need to be made to ensure safety? Will the allergic person have sufficient to eat? Does any food need to be taken? • Can students eat food in rooms? • Is there a specific allergy section on the visit/experience risk assessment? • Is there an allergy trained member of staff accompanying the visit? • Do other students need to understand signs, symptoms of allergy, how to call for help and administer an AAI? 			
Other:			

This must be completed for any activity that is medium with the aim of bringing the risk to LOW.



Activities that are High or Extreme must not happen unless action can be implemented to bring the risk to LOW.						
Hazard	What further action do you need to take to control the risks?			Who needs to carry out the action?	What 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 only 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