

Whole School Allergy Management Risk Assessment



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: • 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?	The location of the student's medication is within the classroom. They are in clearly marked containers with the child's name on. There is a generic spare in the main school office medical cabinet. There is also a generic spare in The Link for breakfast and twilight club. Students do not carry their own medication to PE, lunch or on trips; there are designated adults to carry this role out. The back up medication in the office and The Link are available 7am- 6pm which is the entire time children are on site.		
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 have carried out Allergy Training in Autumn 1 2026 via the National College Platform. Key members of the PTFA have carried out allergy training in Autumn 1 2026 via the National College Platform. This training will be annual in the September safeguarding allocation.		

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. Course must include: • Signs and symptoms of allergy & anaphylaxis • Emergency response • Administration of adrenaline auto-injectors • Prevention of reactions	This means that there is always a member of staff within 5 minutes of the child due to whole staff allergy training. The course covers all of the 'must include' points.		
Food and drink:			
<u>Catering:</u> • 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? • 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	All catering staff have received allergy training via the National College platform. The catering team have copies of the IHP for every child identified as having an allergy. Their photographs are on display in the catering area, office and staff room. There is a daily white board used in the kitchen to show which children have ordered a dinner that day and the relevant allergens. We cook our meals in-house. The school menus are all published on the school website with allergens clearly identified. If there is an issue and the menu it needs to be changed i.e. one oven broken, then all families are emailed to explain the change of meal needed for the next day and possible allergens. If there is a change that day, parents who have children with allergies are called by a member of the office team. Breakfast and Twilight Club staff have IHP for all pupils with allergens. All staff have the allergy training via the National College platform. If children are noted to have food with a known ingredient in i.e. Nutella, the food is removed and parents receive a call from the office the same day. Menu available on school website for Breakfast and Twilight including allergens.		

student/parent/guardian so that a different choice can be made. Consider: - wrap round care - break times - lunch times			
<u>Events involving food:</u> Cake sales Parties Other PTA events Drinks • How can these be made inclusive? • 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. • Are allergens displayed, where appropriate to the event?	All members of the PTFA have received allergy training. PTFA events- register handed to deputy headteacher, children with allergens highlighted and communicated with the PTFA and alternative foods sourced i.e. gluten free pizza, specific bag of gluten free sweets made. Handwashing facilities are always available at events. If children bring in birthday treats, the office have a supply of dairy free, gluten free to ensure children are included. Letters such as Bake Sale state 'nut free school' and that ingredients must be listed with donations and displayed during the event. Allergens displayed in the café area during large events such as Summer Fayre.		
<u>Celebrations:</u> • 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.	If children bring in birthday treats, the office have a supply of dairy free, gluten free to ensure children are included. We are not discouraging these. We do discourage home-made treats when it is a birthday.		

Curriculum activities:			
<u>Cooking:</u> - 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? - 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?	EYFS- Autumn Fruit kebabs Cooking bread Cooking jam tarts Coconut ice squares Chocolate edible sprinklers Gingerbread men Spring Cheese straw snakes Dinosaur biscuits Chinese food banquet Fruits from around the world Chocolate Easter nests Summer Vegetable pizza Jelly with sweets trapped inside Carrot cakes Treasure island rock buns Star fish sandwiches Port hole cup cakes KS1- Range of fruits, vegetables, margarine, bread, flour (prepare and taste). Strawberries, yoghurt, meringue nests and caster sugar (Eton Mess). Lentils, chickpeas, kidney beans and butter beans (properties of food). Meat / fish, vegetables and potatoes / rice. (healthy meal). Range of fruits and vegetables and salad sauces. White bread, brown bread, rolls, wraps and sandwich fillings selected by children. Turkish delight, sweets, breads (RE). Marshmallows, chocolate biscuits (smores). LKS2 Cooking potato in various ways - use of oil/salt/potatoes Cook well Eat well - making taccos - tortillas, beef/corn filling, peppers, cheese, salsa, lettuce, peppers		

	Fresh food good food - making fruity popcorn: oil, popcorn kernels, apple, blueberries, grapes, cinnamon UKS2- Sow, Grow and farm - making pizza, making soup using vegetables i.e. tomatoes, carrots Maafa - african stew Separate spaces are identified. Separate utensils and equipment provided for children with allergies. At the beginning of the lesson, it is discussed with all of the children the importance of separate ingredients, separate utensils and the impact on children with allergies		
<u>Creative activities: e.g. junk modelling, pasta</u> - 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. - Plastic containers should be washed in hot soapy water to remove allergens.	We ensure that packaging is checked and cross referenced with children with allergies in that class. Plastic containers are washed prior to using for junk modelling.		
<u>Music: instrument sharing (cross contamination issue)</u> - 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?	Blowing instruments are placed in the dishwasher after every single use- this applies to recorders where the tops are twisted off and washed. No blowing instruments are shared without being washed.		
<u>Science activities:</u> Review the science curriculum and see where allergens are used. Consider whether these have to be used and	**See curriculum section further up for each key stage.		

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.			
<u>PE:</u> Consider: Indoor Outdoor ~~Forest Schools~~ - 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? - Is there an allergy trained member of staff accompanying away sporting events?	Medication for outdoor and indoor PE is within 5 minutes of every classroom, the main office and The Link. Our wrap around childcare providers are all allergy trained. There is always a member of staff onsite during before or after school clubs who is allergy trained- this is because ALL of our staff are trained. Sports events- all staff are allergy trained, so there is always a trained member of staff on PE events and school trips.		
<u>Break time:</u> Consider: Playground Field	All staff are allergy trained, therefore a minimum of 2 members of staff present every break and lunch time. The medication is in the classroom or the main school office which are less than 5 minutes away.		

- 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?			
School animals:			
Consider: 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 an animal assisted therapy dog who attends school weekly. We currently have no children with pet allergies. Previously, we have had a child allergic to dogs and the dog is allocated one room only and we ensured the child is within their class when the dog walks through the corridors.		
Visitors & supply staff:			
Consider: - 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?	When visitors sign in to the school office, there is an allergy question on the screen that they have to respond to. If visitors were booked who use allergens, there would be a discussion beforehand so they are aware of the needs of the pupils.		
Offsite activities:			

<u>Day trips:</u> Consider: • 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 AAls • 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. • Are any of the activities during the day high risk to the allergic student; inform venues and agree control measures, aim for inclusivity. <u>Residential visits including D of E:</u> Consider: • Storage of AAls 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?	There is a specific medical and SEND risk assessment for every school trip. This names pupils, allergies and the medication needed. All staff have allergy training, therefore there is always a member of staff trained on every trip. School staff/group leaders carry the medication for their group on every school trip. There is a named medical administrator on the residential who records all medications and when they are administered. There are medical and allergy forms completed for residential which are shared directly with the provider. Children with allergens are asked to bring their own items if they would prefer i.e. panto snacks, home made products for the Community Challenge team building day.		
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• 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? • Is there a specific allergy section on the visit/experience risk assessment? • Is there an allergy trained member of staff accompanying the visit?			
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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.