Portway Junior School

Allergy & Anaphylaxis Policy

'This policy has been reviewed on … and has been impact assessed in the light of all other school policies and the Equality Act 2010.'

Headteacher: Emma Wilkinson

Reviewed: July 2026

Policy Review Sheet

Portway Junior School

	Version	Date	Minute No.
Approved by SLT	1	16/07/26	N/A
Reviewed by SLT			
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Whole-School Allergy & Anaphylaxis Policy

1. Policy Statement

Portway Junior School is committed to providing a safe and inclusive environment for all pupils, including those with life-threatening allergies (anaphylaxis). We recognise that allergies are a growing clinical concern and that anaphylaxis is a medical emergency. This policy outlines our "Whole-School" approach to risk reduction, staff training, and emergency response.

2. Roles and Responsibilities

- **The Governing Body:** Will appoint a **Lead Allergy Governor** to oversee compliance and ensure the school has a robust risk management strategy. At Portway this will be Dr Dave Semararo.
- **The Headteacher/Senior Leadership Team:** Will appoint a **Designated Allergy Lead** to manage Individual Healthcare Plans (IHCPs) and coordinate staff training. This will be the School Business Manager.
- **All Staff:** Must complete annual anaphylaxis training and be familiar with the symptoms and emergency protocols for pupils in their care.
- **Parents/Carers:** Must provide the school with up-to-date medical information and ensure that two in-date Adrenaline Auto-Injectors (AAIs) are provided to the school if prescribed.

3. Individual Healthcare Plans (IHPs)

Every pupil with a diagnosed allergy will have a formal IHCP. This document will include:

- Specific allergens (triggers).
- Signs and symptoms of a reaction for that specific child.
- Clear "Step-by-Step" emergency instructions.
- Storage location of the child's medication.
- A recent photograph of the child.

These IHP's are stored on the one drive in the folder – FIRST AID – MEDICAL - IHCP & RA'S FOR ALLERGY AND DIABETES and must be reviewed and updated annually in September by the School Business Manager.

4. Medication & Storage

- **Prescribed AAIs:** Must be stored in a central, accessible, and unlocked location. These are stored in the school office in the medical drawer unit.
- **Spare/Statutory AAIs:** Under Benedict's Law, the school will maintain a supply of "spare" AAIs (not assigned to a specific child) for use in emergencies when a child's own device fails or for children with no previous history of allergy who experience their first reaction.
- **Expiry Tracking:** The Office Staff will check expiry dates monthly and notify parents at least one month before a device expires.

5. Risk Reduction Measures

The school will implement the following "Allergy Aware" protocols:

- **Catering:** The kitchen manager will maintain an allergen matrix for all meals. "Grab and Go" items will be clearly labelled with the 14 regulated allergens.
- **Curriculum:** Food Technology and Science departments must risk-assess every lesson involving food or chemicals.
- **The "No-Sharing" Rule:** A strict policy against pupils sharing food or drinks.
- **Handwashing:** Mandatory handwashing for all pupils before and after lunch to prevent cross-contamination.

6. Emergency Response Protocol

In the event of a suspected anaphylactic reaction:

1. **Stay with the child:** Never leave the pupil alone or ask them to walk to the medical room.
2. **Call for Help:** Alert the designated first aider and the Allergy Lead.
3. **Positioning:** Keep the child lying flat with legs raised (unless they are struggling to breathe, in which case sit them up slightly). **Do not stand them up.**
4. **Administer AAI:** Follow the instructions on the child's specific device (EpiPen, Jext, or Emerade) immediately.
5. **Call 999:** State "ANAPHYLAXIS" clearly to the operator.
6. **Second Dose:** If there is no improvement after 5 minutes, administer a second AAI in the opposite thigh.

7. Post-Incident Review

Following any allergic reaction, the school will conduct a "Cold Debrief" to evaluate the response, update the risk assessment, and provide emotional support to the staff and pupils involved. See Appendix 1 and Appendix 2.

Appendix 1 - Debrief and Lessons Learned

It is important to debrief and review the incident as soon as practicable so that an accurate and reliable account is recorded. This will enable lessons learnt to be identified and implemented to ensure that effective processes and procedures are in place should another event occur.

Test drills and practice evacuations etc should also be appraised in the same way to ensure that you are as ready and prepared as possible in the event of a real emergency.

During the debrief it is important to identify:	
What went well?	
What didn't go well?	
What could you do better?	

Debrief and Lessons Learned	**Completed** **Sign / Date**
Review the chain of events from start to finish, step by step	
Collate specific feedback on each of the following:	
Policies and procedures	
Communication	
Health and Safety	
Support from 3rd Parties	
Wellbeing	
Staff resources and training	
Record all your findings in a lessons learnt log	
Take any appropriate action to update policies/procedures and risk assessment	
Take any appropriate action to rectify or improve the facilities	
Identify and undertake any further training	

Appendix 2 - ALLERGY AND ANAPHYLAXIS RISK ASSESSMENT					
Significant Hazards	**Persons Affected**	**Controls**	**Risk Rating**	**Action Required**	**Action By & Date**
Undiagnosed Allergies Severe reaction in a pupil with no known history; delay in treatment	Pupils	School to hold "spare" adrenaline auto-injectors (AAIs) not assigned to a specific pupil.	LOW		
Staff Awareness Staff unable to recognise symptoms of anaphylaxis; slow emergency response.	Pupils	Mandatory Training: Annual allergy and anaphylaxis training for all staff (not just first aiders) Conduct regular anaphylaxis emergency drills	LOW		
Inadequate Policy Standalone Policy: Implement a dedicated, published Whole-School Allergy Policy. Appoint a named Senior Lead and Governor for allergy safety.	Pupils	Standalone Policy: Implement a dedicated, published Whole-School Allergy Policy. Appoint a named Senior Lead and Governor for allergy safety.	LOW	Governor to be assigned July 26 & Policy shared and implemented with staff in September	July 26
Communication Gap Individual Healthcare Plans (IHPs): Every pupil with a diagnosed allergy must have a current IHP and Allergy Action Plan accessible to all staff.	Pupils	Individual Healthcare Plans (IHCPs): Every pupil with a diagnosed allergy must have a current IHP and Allergy Action Plan accessible to all staff.	LOW	IHP's currently in place. SBM to identify those affected in new Year 3 intake in July and complete IHP to be communicated to all staff	July 26
Cross-Contamination Review catering, science, and art for allergen risks. "No sharing food" policies and mandatory handwashing.	Pupils	Review catering, science, and art for allergen risks. "No sharing food" policies and mandatory handwashing.	LOW	Email risk assessment to all staff highlighting this area to Art and DT leads	July 26