



Whole school Food Policy and Allergy Policy

River Bank Primary School

September 2026

Whole School Food Policy

The purpose of this policy is to ensure a consistent approach to healthy eating across the school by providing clear guidance on school meals, breakfast clubs and packed lunches. This supports children's health, wellbeing and learning.

This policy covers all aspects of food and drink at school.

At school we promote a healthy eating environment that helps pupils develop positive eating habits and make informed food choices. This Whole School Food Policy outlines the school's approach to food and nutrition.

This policy is available to parents, carers, staff, and pupils on our school website. Everyone involved in preparing, serving or providing food and drink during the school day is expected to follow this policy, including any organisations working on the school site.

The nutritional principles of this policy are based on current evidence-based findings; and the Eatwell Guide is the agreed model for ensuring a healthy balanced diet.

<https://www.nhs.uk/Live-well/eat-well/food-guidelines-and-food-labels/the-eatwell-guide/>

<https://www.gov.uk/government/publications/the-eatwell-guide>

The school will follow the school food standards for food throughout the school day.

<https://www.gov.uk/government/publications/school-food-standards-resources-for-schools>

Further information can also be found in the School Food Plan (2014)

www.schoolfoodplan.com

Food Policy Coordinator

This school food policy and healthy eating strategy is co-ordinated by Amanda Coyte (medical officer) and the member of the Senior Management Team that oversees all aspects of food in school is David Sansom (headteacher)

Food Policy Aims

The main aims of our school food policy are to:

1. Promote healthy eating and drinking habits across the school
 2. Ensure all food and drink provided in school meets national nutrition standards
 3. Encourage pupils to make healthy informed food choices
 4. Support pupils' physical health, wellbeing, growth and development
 5. Ensure food provision is inclusive and meets pupils dietary, cultural, religious and medical
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needs

6. Provide opportunities for pupils to learn about healthy eating through the curriculum

These aims will be addressed through the following areas:

Curriculum:

Food and Nutrition Education

Pupils are given regular opportunities to develop their understanding of healthy eating, healthy lifestyles and the importance of looking after both their physical and mental wellbeing.

Healthy eating and healthy minds and bodies are taught across a range of subjects including science, PSHE and physical education (PE). Through these subjects' pupils learn about balanced diets, the importance of nutrition, physical activity, personal wellbeing and how healthy lifestyle choices contribute to good health.

Practical food education is also an important part of the curriculum. All year groups take part in cookery lessons where pupils develop food preparation skills, learn about healthy ingredients, food hygiene and how to prepare simple, nutritious meals.

By delivering consistent messages about food, nutrition and healthy lifestyles across the curriculum, the school aims to equip pupils with the knowledge and skills they need to make informed choices that support their health and wellbeing.

Food and Drink Provision Throughout the School Day

The School Food Regulations 2014 came into effect on 1 January 2015 and set the standards for food provided in schools.

All maintained schools, including academies and free schools must follow these regulations. The standards are designed to ensure that pupils are provided with healthy, nutritious and good quality food, to promote healthy eating habits and support the wellbeing of all children.

The regulations apply to school lunches provided to registered pupils and they apply to all food and drink provided to pupils up to 18:00, including breakfast club, morning break and after school club.

Full details and guidance are available at:

<https://www.gov.uk/government/publications/standards-for-school-food-in-england/school-food-in-england>

<https://www.gov.uk/government/publications/school-food-standards-resources-for-schools>

Breakfast Club

Breakfast is an important meal that should provide 25% of a child's energy requirement and contribute significantly to their vitamin and mineral requirements.

The school operates a breakfast club that provides a nutritious meal for pupils before the school day and complies with the standards for 'school food other than lunch'.

The school breakfast menu includes a wide variety of cereals including multigrain options, 50/50 bread and a range of different fruits/ vegetables daily. Fresh water and milk are also available.

Breaktime Snack

The school recognises that snacks can play an important role in the diets of young people and can contribute positively to a balanced and healthy diet.

Fresh, cold drinking water is available throughout the school, with water dispensers located in every corridor for all children to access.

Our school participates in the National Fruit & Vegetable Scheme, which provides a selection of fresh fruit and vegetables each day for children in KS1. The fruit and vegetables are collected from the snack trolley and taken to classrooms where children can choose the fruit or vegetable they would like before going outside for break time.

Children in KS2 are encouraged to bring a healthy snack from home. The school discourages snacks that are high in fat, sugar and salt during break time. Guidance on suitable snack choices including examples of healthy options is shared with families through the school newsletter. Posters displayed around the school also promote healthy snack choices and encourage children to develop healthy eating habits.

School Lunch

Food prepared by the school catering team (ABM) meets the School Food Standards.

As a school we encourage pupils to enjoy a school lunch provided by our catering team. Free school meals are available to all pupils who are eligible. All children in EYFS to Year 2 are entitled to a Universal Infant Free School Meal. Children in Years 3 to 6 will also be eligible for free school meals if their parent or carer receives Universal Credit.

Healthy choices are promoted at lunchtime through the choice of two vegetables at the hot counter and a salad bar offering eight different salad options. Children are encouraged to enjoy the salad bar with unlimited salad available.

School lunch menus are available on the school website for parents, carers and children to view before making their meal choice. Every day children have the choice of a halal meat option, a vegetarian option, a sandwich option, a jacket potato option or a pasta option.



Packed Lunches

The school encourages parents and carers to provide packed lunches that are balanced and meet healthy nutritional standards.

Parents and carers are regularly reminded that the school is a nut free environment. This information is communicated through the school newsletter and displayed on posters at classroom entrances.

Parents and carers are asked not to include fizzy drinks, sweets or other confectionery in packed lunches. Instead, they are encouraged to provide healthy snacks such as fruit, vegetables or other nutritious options.

Information and guidance relating to food safety will be communicated to parents and carers where appropriate.

After School Club

The food and drink provided at our after-school club is in line with the school's Whole School Food Policy and complies with 'School Food Standards for food and drink provided outside of lunchtime'.

The after-school club offers a variety of healthy snacks each day including rice cakes, crackers and fresh fruit. Fresh drinking water is available to all children at all times.

Use Of Food as A Reward/ Birthdays

The school does not encourage the regular consumption of sweets or other foods that are high in sugar or fat, particularly as a reward for good behaviour, academic achievement or other accomplishments. Instead, a range of positive reinforcement strategies are used to recognise and celebrate pupils' achievements, including praise, stickers and certificates.

To support healthy eating and to help protect children with allergies, pupils are asked not to bring sweets or other confectionery into school to share with their classes on birthdays or other special occasions. This message is shared with parents each September.

Drinking Water

The School Food Standards recommend that free, fresh drinking water is available to all pupils at all times.

The school supports this recommendation by providing a free supply of fresh, chilled drinking water throughout the school day and encourages pupils to drink water regularly to stay hydrated.

Water dispensers are located in every corridor, enabling pupils to refill their water bottles throughout the day. Cups are also available for pupils who do not have a water bottle. At



lunchtime jugs of fresh drinking water are provided on every table and cups are available for all children.

Special Dietary Requirements:

1. Special Diets- Religious and Ethnic Groups

The school provides food in accordance with pupils' religious beliefs and cultural practices.

2. Vegetarian Diets/ Halal Meals

Halal and vegetarian meal options are available every day to meet the needs of our school community.

Special Diets- Medical

Under Section 100 of the Children and Families Act 2014, schools have a duty to support pupils with medical conditions. The school recognises that some pupils may require special diets due to medical conditions, allergies, intolerances, religious beliefs or other specific dietary needs. In these circumstances parents and carers are asked to inform the school of their child's dietary requirements as soon as possible.

The school receives individual Allergy Action plans for pupils with severe allergies who require an adrenaline auto-injector. These action plans are pinned on the wall in the medical room and available for all staff to view. They are also in every first aid kit with the child's auto-injector.

The school and the school catering provider (ABM) are informed of all food allergies, intolerances and medically prescribed diets via email. Parents/ Carers are then sent a QR code to complete a form from ABM (Appendix 1). Once this has been completed the catering team prepares an individual menu for each child to ensure their dietary needs are met.

To reduce the risk of error, children with special dietary requirements are identified during the lunch service using several measures. The kitchen staff check each child's individual dietary or allergy information before serving their meal and pupils are marked against a register to confirm they have received the correct meal. Pupils also wear an orange lanyard during lunchtime displaying their name and dietary requirement or allergy. This also provides an additional visual prompt for kitchen staff before food is served.

All dietary requirements, food allergies and medical information are recorded on Arbor and are accessible to relevant staff including class teachers, SLT and office staff to ensure pupils' needs are understood and met.

For further information on the school's procedures for managing allergies, including the prevention and management of allergic reactions, refer to allergy section of this policy.

Food Safety

The school is committed to maintaining food safety and high standards of hygiene. Food safety procedures are followed whenever food is prepared, handled, stored or served.

Food is bought from trusted suppliers and stored, prepared and labelled according to food safety laws and the manufacturer's instructions. Food safety risks are identified and managed. The school provides suitable storage, refrigeration and handwashing facilities.

All staff involved in preparing or handling food receive food safety and hygiene training and are required to follow the relevant policies and procedures. ABM provide all catering staff with a uniform which they have to wear and this needs to be kept clean.

The Catering Manager is responsible for making sure food is safe and food hygiene laws are followed. Staff holding Food Safety and Hygiene qualifications include the Catering Manager and other designated members of the catering team. A copy of their current certificates are held by the school.

The Food and Eating Environment

The school provides a clean, safe and welcoming dining environment where pupils are encouraged to enjoy their lunch in a relaxed and sociable atmosphere.

At lunchtime, both the dining hall and the sports hall are used to accommodate pupils. Long dining tables encourage children to sit together, promoting positive social interaction and the development of good table manners. Members of staff also eat alongside pupils, modelling positive eating behaviours and contributing to a friendly, inclusive dining experience.

Lunchtime supervisors have received anaphylaxis awareness training and play an important role in ensuring that lunchtime is a safe, enjoyable and inclusive experience for all pupils. They support children with their individual needs, encourage healthy eating habits and promote positive behaviour throughout the lunchtime period.

For further information on the management of food allergies and anaphylaxis, please refer to the allergy section of this policy.

Leading By Example and Staff Training

Teachers, catering staff and lunchtime supervisors all play an important role in promoting healthy eating and helping pupils develop positive attitudes towards food. All staff should be familiar with the school's Whole School Food Policy and healthy eating guidance.

Staff are kept up to date through staff induction, policy reviews and relevant training, including allergy and anaphylaxis awareness. Any important updates relating to food and nutrition are shared with staff as needed.

All staff are expected to promote healthy eating and act as positive role models. Staff are encouraged to make healthy food and drink choices while in school and to support the school's



healthy eating ethos.

Food Related Action Plans

The school recognises the importance of providing healthy and nutritious food throughout the school day to support pupils' health and wellbeing.

Our school is committed to promoting healthy eating and meeting the standards of the 'Healthy Schools Rating Scheme', which recognises schools that support pupils' health and wellbeing as part of the government's Childhood Obesity Plan.

Action plans we have in place to support healthy eating and nutrition are:

- A healthy lunch menu that is changed termly
- Healthy choices at lunch and break times including fruit, vegetables and unlimited salad
- Fresh, cold drinking water available all day
- Healthy eating taught within the curriculum
- Parent engagement to ensure healthy and nutritious snacks and packed lunches
- Reviewing of school meals
- Procedures in place for allergies and dietary requirements.

Monitoring and Evaluation

The policy is reviewed annually, or sooner if there are changes to legislation. Responsibility for reviewing the policy rests with David Sansom (Headteacher) and Amanda Coyte (Medical Officer).

The effectiveness of this policy is monitored through:

- Regular reviews of the school's food provision and compliance with the School Food Standards
- Feedback from pupils, parents, staff and the school council
- Monitoring of school meal uptake and healthy eating initiatives
- Reviews of food safety and hygiene procedures
- Monitoring of the management of food allergies, special dietary requirements and food related incidents
- Evaluation of healthy eating in the curriculum and its impact on pupils' knowledge and wellbeing

The outcomes of monitoring are to improve the school's food provision.

This policy is communicated to all staff and is shared with parents and carers through the school website. A copy is available from the school office on request.



Allergies

Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. Allergic reactions can cause mild symptoms such as itching, sneezing or rashes but they can also result in a much more severe reaction known as anaphylaxis.

Anaphylaxis is a serious life-threatening allergic reaction that can affect the whole body, often within minutes of exposure to an allergen, although symptoms can sometimes develop several hours later. Common triggers include foods, insect stings and medications.

An allergic reaction is usually considered to be anaphylaxis when it involves difficulty breathing or affects the heart, blood pressure or circulation. The symptoms of anaphylaxis are often described using the ABC approach (Airway, Breathing and Circulation).

It is possible to be allergic to almost any substance that contains a protein. However, most allergic reactions are caused by a relatively small group of common allergens. The 14 most common allergens are: celery, cereals containing gluten, crustaceans, eggs, fish, lupin, milk, molluscs, mustard, peanuts, sesame, soya, sulphur dioxide and sulphites and tree nuts. Although these are the most common food allergens they are not the only substances that can cause allergic reactions. Allergens may be ingested, inhaled, absorbed through skin contact or introduced by injection.

This policy sets out how our school will support pupils with allergies to ensure they are safe and are not excluded in any aspects of school life.

Roles and Responsibilities:

Parent Responsibilities

New starters to the school will be provided with a medical information form as part of their welcome pack. This form enables parents/carers to inform the school of any known allergies or food intolerances their child has. If a child develops an allergy or intolerance during their time at the school parents/carers must notify the school office via email so that the child's records can be updated and appropriate arrangements made.

If a child has been prescribed an adrenaline auto-injector (AAI), it is the responsibility of the parent/carer to provide the school with a copy of their child's Allergy Action Plan. This enables the school to identify the child's allergens, take appropriate steps to minimise the risk of exposure and ensure staff are aware of the procedures to follow in the event of an allergic reaction.

Parents/carers are also responsible for providing the school with an in date auto-injector and replacing it before its expiry date or sooner if it has been used.

Parents/carers must keep the school informed of any changes to their child's allergies,

treatment, or Allergy Action Plan to ensure records remain accurate and appropriate support can be provided.

Staff Responsibilities

All staff receive annual anaphylaxis awareness training delivered by the Medical Officer (Amanda Coyte), to ensure they are equipped to recognise and respond appropriately to allergic reactions. Midday staff and EYFS staff have extra training delivered by Active Luton.

Class teachers and cover staff must be aware of the pupils in their care who have known allergies, as an allergic reaction can occur at any time and not only during mealtimes.

Any activities involving food or other potential allergens, such as art, craft, science, or sensory activities that may involve materials including latex must be planned and supervised with appropriate caution. Staff should check in advance that any materials used are suitable for pupils with known allergies and take reasonable steps to minimise the risk of exposure.

Staff leading school trips or sporting events are responsible for ensuring that all relevant emergency medication is taken and must check that pupils with medical conditions including allergies, have their prescribed medication with them. Pupils who are unable to produce their required medication will not be permitted to attend the trip or event.

The Medical Officer is responsible for ensuring that all Allergy Action Plans are up to date, displayed in the medical room and a copy is with each child's auto-injector in their first aid box and that the information contained within them is accurately recorded and accessible on pupils' Arbor accounts.

While it is the responsibility of parents/carers to ensure that prescribed medication including adrenaline auto-injectors are in date and replaced as necessary, the Medical Officer will monitor expiry dates and issue reminders to parents/carers when medication is approaching expiry. The Medical Officer maintains a register of pupils with prescribed adrenaline auto-injectors which includes their name, class and medication expiry dates. The medical officer also ensures that all allergic reactions and near misses are appropriately recorded and reported via the Top Marks Claim Management Portal.

Pupil Responsibilities

Pupils are encouraged to have a good awareness of their allergies and symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.

Pupils who are trained and confident to administer their own auto-injectors will be encouraged to take responsibility for carrying them with them at all times.

Allergy Action Plans

Allergy Action Plans are pinned on the board in the medical room and a copy is also stored in classroom first aid kits with the child's auto-injectors. All information from them are updated



onto the children's Arbor accounts. Allergy Action Plans are designed to function as Individual Healthcare Plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction such as an auto-injector.

British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans are produced by a medical professional and should not be created by school. These are a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK.

Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen, however they can take longer.

Mild to moderate allergic reaction symptoms may include:

- A red, raised rash (known as hives) anywhere on the body
- A tingling or itchy feeling in the mouth
- Swelling of lips, face or eyes
- Stomach pain or vomiting

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY- swelling in the throat, tongue or upper airway (tightening of the throat. Hoarse voice, difficulty swallowing)
- BREATHING- sudden onset wheezing, breathing difficulty, noisy breathing
- CIRCULATION- dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness

The term for this more severe reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and on rare occasions can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. Adrenaline is the mainstay of treatment and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

As Soon as Anaphylaxis is Suspected, Adrenaline Must Be Administered Without Delay.



Action:

- **Keep the child where they are, call for help and do not leave them unattended**
- **LIE CHILD FLAT WITH LEGS RAISED-** they can be propped up if struggling to breathe but this should be for as short a time as possible
- **USE ADRENALINE AUTO- INJECTOR WITHOUT DELAY-** and note the time given. Auto-injectors should be given into the muscle in the outer thigh. Specific instructions vary by brand- always follow instructions on the device.
- **Call 999** and state **ANAPHYLAXIS (ana-fil-axis)**
- If no improvement after 5 minutes, administer second auto-injector
- If no signs of life, commence CPR.
- Call parent/ carer as soon as possible

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up or sit them on a chair even if they are feeling better. This could lower their blood pressure drastically causing their heart to stop.

All pupils must go to the hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

In the event of suspected anaphylaxis where a child has no known allergy or Allergy Action Plan, but is experiencing a life threatening allergic reaction, the school's spare adrenaline auto-injector may be administered in accordance with current legislation and the school's emergency procedures. In these circumstances, prior parental consent is not required as the administration of emergency treatment is in the child's best interests and is lifesaving. Emergency services (999) must be called immediately following the administration of the adrenaline auto-injector and the child's parents/carers must be informed as soon as possible.

Supply, Storage and Care of Medication

Every child's prescribed adrenaline auto-injector will be kept in the first aid kit in their classroom. The first aid kit will go with the class whenever they move to other areas of the school such as the sports hall for PE. Auto-injectors are always close by and can be accessed quickly in an emergency. All staff are aware of where auto-injectors are stored and can access them if needed. If an older child feels they are competent enough to carry their own auto-injector, this is encouraged. All adrenaline auto-injectors must be kept in their original packaging with the prescription label attached and a copy of the child's Allergy Action Plan will be stored with the medication.

Auto injectors should be stored at room temperature and away from direct sunlight and extreme temperatures.

Disposal

Auto-injectors are single use only and must be disposed of in a sharps bin, they can also be given to ambulance paramedics on arrival. Sharps bins can be found in the Medical Room.

Spare Adrenaline Auto Injector

The school keeps a spare adrenaline auto-injector for use in an emergency. This may be used if a child's own auto-injector is unavailable, has expired, has misfired or if a second dose of adrenaline is required. It may also be administered if a child is experiencing anaphylaxis for the first time and is having a life-threatening allergic reaction. The spare adrenaline auto-injector will only be used in accordance with current legislation and the school's emergency procedures.

The spare auto-injector is stored in the medical room in the evacuation bag and is always accessible. The Medical Officer has the expiry date recorded and will replace it when expired or used.

Staff Training

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the schools Allergy Policy are Amanda Coyte (Medical Officer) and Becki Greenacre (Safeguarding Lead).

All staff will receive allergy awareness training delivered by the Medical Officer. Training is provided annually and as part of the induction process for all new staff. Trainer auto-injectors are stored in the medical room for all staff members to practice with and gain confidence in case of an emergency.

The training covers the common causes and triggers of allergic reactions, how to recognise the signs and symptoms of an allergic reaction and anaphylaxis, when and how to administer emergency treatment and the measures staff can take to reduce the risk of a child experiencing an allergic reaction such as lesson and school trip planning.

Inclusion and Safeguarding

The school is committed to supporting all children with medical conditions including allergies, so they can take part fully in school life, stay healthy and achieve their full potential. We will ensure the appropriate support and planning is in place to meet each child's individual medical needs.

Catering

The school catering team (ABM) 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.

The school menu is available to view on the school website and parents/carers can book meals through SCOPAY. Children with allergies or food intolerances are provided with an individual menu by ABM that is tailored to their specific dietary needs. Parents/carers can choose and book meals from this menu ensuring that suitable options are available for their child.

Menus containing all ingredients and nutritional values are available upon the request of

parents/ carers.

The school provides children with allergies or specific dietary requirements an orange lanyard to wear at lunchtime. The lanyard displays the child's name and the allergens they need to avoid. This helps the catering team identify children who have an individual menu provided by ABM. The kitchen staff also uses a register to check that each child receives the correct meal before it is served.

Parents/ carers are asked to email ABM directly with their child's allergies or dietary requirements. They are then given a QR code to complete a form so that ABM can create the individual menus.

School adheres to the following 'Department of Health guidance recommendations':

- Bottles and lunch boxes provided by parents for pupils with food allergies should be labelled with the name of the child for whom it is intended for
- Pupils that are competent enough should check with catering staff when receiving their lunch that it does not contain any allergens they cannot have
- Kitchen staff should be vigilant about cross contamination during handling, preparation and serving food, such as preparing food for children with food allergies first and careful cleaning of food preparation area and utensils (using warm soapy water). For further information parents/ carers are encouraged to speak with the kitchen manager
- Food should not be given without parental permission such as sweets for birthdays

School Trips and Sporting Events

Staff leading school trips will ensure that all relevant emergency medication such as auto-injectors are taken and that the medication is accessible throughout the trip. If a pupil's required medication is not available they will not be able to attend the trip.

All activities will be risk assessed to identify any potential risks to pupils with allergies. Where necessary, reasonable adjustments or alternative activities will be planned to ensure all pupils can take part safely.

Overnight school trips will be carefully planned. A meeting with the parents/carers and the trip leader will be arranged before the trip to discuss the child's individual needs. Where food is provided by the trip lead will inform the venue in advance of the child's allergies and dietary requirements to ensure suitable arrangements are made.

The trip risk assessment will include the location of the nearest hospital and staff will carry up to date emergency contact details for all pupils.

Allergy Awareness and Nut Free

The school operates as a nut free school to help reduce the risk of exposure to nut allergens for pupils with nut allergies. Parents/carers, pupils, staff and visitors are asked not to bring nuts or products containing nuts onto the school site. This includes products that say 'may contain nuts'

on the label.

Although the school takes reasonable steps to minimise the risk of exposure to nuts, unfortunately it is not possible to guarantee a completely nut free environment. The school therefore promotes a whole school approach to allergy awareness. This includes ensuring that staff and pupils understand the importance of avoiding known allergens, recognising the signs and symptoms of an allergic reaction, knowing how to respond in an emergency and following policies and procedures designed to minimise the risk of allergen exposure.

Risk Assessment

School conduct a detailed individual risk assessment for all pupils with allergies to help identify any gaps in our systems and processes for keeping allergic children safe Appendix 2.

School and individual risk assessments can be downloaded for free from:

<https://www.anaphylaxis.org.uk/downloads-form/safer-schools-download/>.

Useful Links

Anaphylaxis UK

<https://www.anaphylaxis.org.uk/>

Safer Schools Programme

<https://www.anaphylaxis.org.uk/education/safer-schools-programme/>

AllergyWise for Schools online training

<https://www.allergywise.org.uk/p/allergywise-for-schools1>

Allergy UK

<https://www.allergyuk.org>

Whole school allergy and awareness management

<https://www.allergyuk.org/schools/whole-school-allergy-awareness-andmanagement>

BSACI Allergy Action Plans

<https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/>

Spare Pens in Schools

<http://www.sparepensinschools.uk>

Department for Education Supporting pupils at school with medical conditions

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment>



<data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf>

Department of Health Guidance on the use of adrenaline auto-injectors in schools

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline auto injectors in schools.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf)

Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016)

<https://www.nice.org.uk/guidance/qs118>

Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020)

<https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834>

Review

Date policy implemented: September 2026

Review Date: September 2027



Appendix 1

Special Dietary Request Form

Please only complete this form if your child has a Food Allergy or Lifestyle Preference which would not be covered by your standard meal. We will require all the below information to be completed. We will then review the information and provide a special diet menu for your child.

School Name *

Please ensure you have selected the school your child attends from the drop down box, click on the +Add to find the school.

Student Full Name *

Known as Name:

Date of Birth *

Date format: dd/mm/yyyy

Year Group *

- Reception
- Year 1
- Year 2
- Year 3
- Year 4
- Year 5
- Year 6
- Nursery

Class *

Allergy Information *

(Please select all which apply)

- Celery
- Gluten
- Crustaceans
- Eggs / Egg Products
- Fish
- Lupin
- Milk / Dairy Products
- Molluscs
- Mustard
- Nuts
- Peanuts
- Sesame Seeds
- Soya

- Sulphur dioxide
- Other
- NONE

Life choice / Religion

- Halal
- No Beef
- No Pork
- No Red Meat (No Beef, Pork, or Lamb)
- Pescatarian (No Red or White Meat)
- Vegetarian
- Hindu - Egg Free Vegetarian
- Vegan
- Jainism - Egg, Onion, and Garlic Free Vegetarian

Other Allergies (Please write 'Other Allergies' Here)

(Allergies that fall outside of the 14 allergens Only - Medical Evidence is required for these)

Medical Evidence

(For 'Other Allergies' only (anything outside of the 14 main allergens), Evidence is not required for any of the 14 main allergens)

Select an option

Symptoms of Allergy

Epi Pen Required for anaphylaxis *

Other Treatment Required

Status (office use only)

Parent/Guardian Full Name *

Parent's email *

Contact Number *

School Representative

This is the schools administration department email address

Date Completed *

Today's date

Date format: dd/mm/yyyy

Date Special Diet issued by ABM (office use only)

Date format: dd/mm/yyyy

ABM Representative Signed by (office use only)

Appendix 2

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: • 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?			
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. 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 Ideally would include: • Types of allergen: food and non-food • Curriculum • Trips & visits including sports • Reporting and recording AllergyWise® for Schools is a low cost, CPD certified course that is clinically reviewed and assured to be up to date.			
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 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 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. Allergen Matrix can be found here: https://www.fooddocs.com/food-safety-templates/food-allergen-chart • Are allergens displayed, where appropriate to the event?			
<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.			
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?			
<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. 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.			
<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?			
<u>Science activities:</u> - 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.			
<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?			

Break time: Consider: Playground Field - 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 Dogs in School guidance that will assist with this section.			
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?			
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? • 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