Westminster Abbey
Choir School

S83 – Allergy Safety Policy

Reviewed Date: August 2026
Next Review Date: August 2027

Westminster Abbey Choir School is committed to safeguarding and promoting the welfare of all pupils with allergies and supporting their full participation in school life.

1. **Guidance and Framework**

   This policy has regard to the following:
   DfE statutory guidance "Allergy safety in schools" (July 2026)

   It should be read alongside the following school policies:
   S08: First Aid and Medical Care
   S10: Pupil Welfare
   S43: School Trips and Educational Visits
   S73: Provision for pupils with particular religious, dietary, language or cultural needs

2. **Aims**
   - Protect pupils, staff members, and visitors with allergies.
   - Reduce risk of exposure to allergens.
   - Ensure prompt treatment.
   - Support inclusion and wellbeing of those with allergies.
   - Provide training for staff to support those with allergies.

3. **Roles and Responsibilities**
   The Deputy Headteacher is the school's Allergy Champion.

   The Deputy Headteacher delegates day-to-day operational management of allergy arrangements to the Matron and in their absence Assistant Matron.

   Responsibilities include:
   - Overseeing implementation of this policy.
   - Ensuring staff training takes place.
   - Monitoring allergy incidents and near misses.
   - Ensuring Individual Healthcare Plans are maintained.
   - Providing periodic reports to the Governing Body on serious allergy incidents, trends and lessons learned.

   The Matron is responsible for:
   - Maintaining allergy records and updating information posters for the catering staff.
   - Maintaining Individual Healthcare Plans.
   - Monitoring emergency medication and expiry dates.
   - Ensuring "spare" emergency AAIs are available.
   - Delivering information and guidance to staff.
   - Reviewing allergy incidents and near misses.

All staff are responsible for:

- Understanding how to recognise an allergic reaction.
- Knowing how to summon assistance.
- Following individual healthcare plans.
- Implementing risk control measures.
- Completing medical tracker records following incidents or near misses.

The Governing Body has overall responsibility for ensuring appropriate arrangements are in place to support pupils with allergies.

4. Awareness Training

All staff who may be present while pupils are on site, including teaching, boarding, administrative and support staff, will receive allergy awareness and anaphylaxis training, refreshed regularly and whenever procedures change. Training for staff will encompass an online training as well as a practical training on using an AAI (Adrenaline Auto-Injector).

Training for catering staff will be provided and confirmed by Harrisons who are responsible for catering at the school.

Visitors, volunteers, contractors, and agency staff who may have responsibility for pupils will be informed of relevant allergy procedures and emergency arrangements.

5. Wellbeing

The school will actively support the emotional wellbeing, inclusion, and participation of pupils with allergies and will avoid practices that unnecessarily isolate, stigmatise or exclude pupils because of an allergy.

The school will make reasonable adjustments where necessary to ensure that pupils with allergies can participate fully and safely in all aspects of school life. This includes but is not limited to consideration of allergies when planning activities including using or making food and trips out that involve food ensuring that pupils have a similar experience to those without allergies.

6. Minimising Risk

Risk assessments and reasonable control measures will be implemented. The school will identify foreseeable allergen risks in classrooms, boarding, catering, sport, trips and co-curricular activities. The school does not operate on the assumption that any site can be guaranteed allergen free.

7. Food Allergy

The Catering Team will maintain allergen information, support safer eating arrangements, minimise cross-contamination risks and communicate concerns promptly. Individual arrangements will be developed for pupils with food allergies as needed.

8. Individual Children and Young People

- **Identification**
  Parents must notify the school of:
  - Diagnosed and suspected allergies including:
    - Food allergies,
    - Insect venom allergies,
    - Medication allergies,
    - Latex allergies.
  - Previous anaphylaxis.
  - Prescribed medication.
  - Relevant clinical advice.

  Information is recorded on Medical Tracker and shared with relevant staff on a need-to-know basis.

- **Individual Healthcare Plans**
  Pupils with significant allergies will have an Individual Healthcare Plan including:
  - Allergens,
  - Symptoms,
  - Medication
    - Where appropriate, pupils may carry their own emergency medication following agreement between pupil, parents, healthcare professionals and the school.
  - Emergency procedures,
  - Storage arrangements,
  - Self-carry responsibilities,
  - Visit arrangements,
  - Boarding considerations.

  Plans are reviewed annually, after incidents, at transition points and when medical information changes.

- **Prescribed Adrenaline**
  Pupils prescribed AAIs should have them available in accordance with their healthcare plan. Staff will know where devices are located and

how to use them. At no point will prescribed AAIs be stored in a locked location or at a height that cannot be reached.

Prescribed medication will only be used for the individual for whom it has been prescribed. Where an AAI, out of its box, does not have a name on it, this will be written on to ensure it is used for the correct individual.

9. Emergency Medication

- **"Spare" adrenaline devices**
  The school keeps prescribed AAIs and spare emergency AAIs at designated locations.
  Spare AAIs are always stored in pairs and can be found at the following locations:
  - In the school staff room on the lower ground floor,
  - In Song School in the cupboard behind the piano,
  - In the Games First Aid Kit to be taken to all off-site sporting activities.

A pair of AAIs must be taken on all trips. The school matron will advise which pair to take to ensure there is always a pair of AAIs available for use as needed.

A "spare" AAI may be used in a situation where an individual's prescribed AAI is not available to treat them.

A "spare" AAI may be administered by a trained member of staff acting in good faith in an emergency where anaphylaxis is suspected, whether or not a previous allergy diagnosis is known.

- **"Spare" asthma inhalers**
  The school maintains a "spare" asthma inhaler. This is stored in the Games First Aid Kit.
  "Spare" asthma inhalers can be used if the child or young person's prescribed inhaler is not available (for example, because it is broken or empty).
  "Spare" asthma inhalers must only be used where an individual has been prescribed a reliever inhaler, but it is not available.

The Matron completes monthly stock, and expiry checks for both "spare" and prescribed emergency medication and records actions taken. Parents will be notified promptly where replacement prescribed medication is required due to expiry or use.

10. Managing Allergic Reactions and Anaphylaxis

All staff should be alert to possible signs of allergic reaction including:

- Rash or hives

- Swelling
- Itching
- Abdominal pain
- Nausea or vomiting
- Difficulty breathing
- Wheezing
- Throat swelling
- Collapse

Where a child has an IHCP for an allergy their treatment will be outlined there and should be followed.

If a child without a known allergy displays allergy symptoms, the Matron or other authorised adult will assess their symptoms and treat as appropriate. Where a child displays symptoms of an allergic reaction, they should be monitored for the next hour in case it develops into a more serious reaction.

Where anaphylaxis is suspected in any pupil:

- Adrenaline must be administered without delay,
  - *Adrenaline should be administered as soon as possible, within five minutes. Do not wait to contact the emergency services before administering adrenaline. (Allergy Safety in Schools, July 2026)*
- 999 must be called immediately,
- Parents are to be informed as soon as practicable and the pupil medically assessed even if symptoms improve.
- A second AAI may be given after 5 minutes if symptoms have not improved and medical help has not arrived.
- Any pupil who receives adrenaline must be transferred to hospital by ambulance for medical assessment, even if symptoms improve.

See Appendix A.

11. Visits and Trips

Pupils with allergies will be enabled to participate wherever reasonably possible. Risk assessments must consider allergens, medication, supervision, catering arrangements, travel, and access to emergency medical care. Appropriate medication must accompany the pupil.

For all visits and trips, a pair of “spare” AAIs must be taken and if a pupil with a prescribed inhaler is attending the “spare” inhaler should also be taken.

12. Serious incidents and "near misses"

All allergy incidents, reactions and near misses will be recorded on Medical Tracker. The Headteacher or Deputy Headteacher and Matron will review incidents termly to identify lessons learned, trends, required actions and any safeguarding concerns.

- A serious incident is identified as any event relating directly to a medical condition (including allergy) in which a child, young person, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

- A "near miss" is identified an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so, for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

13. Information Sharing

The school will work in partnership with parents, pupils, healthcare professionals, catering providers, and Westminster Abbey colleagues where appropriate. Relevant allergy information and emergency procedures will be made available to temporary and visiting staff on a need-to-know basis. Information will be shared proportionately to protect pupils and support safe care.

14. Awareness of the Allergy Safety Policy

This policy will be made available to relevant staff and reviewed annually or when guidance changes by the Deputy Headteacher, Matron and School Business Manager before approval by Governors.

This policy will be available on the school website.

Appendix A

Management of Anaphylaxis

Recognise the signs of anaphylaxis

A AIRWAYS
- Tightening of the throat
- Hoarse voice
- Difficulty swallowing
- Swollen tongue

B BREATHING
- Sudden wheezing
- Difficult or noisy breathing
- Persistent cough

C CIRCULATION
- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

If any one (or more) of these signs are present: **Don't delay**

1. **Lie flat with legs raised** (if breathing is difficult, allow to sit)

2. **Give adrenaline device without delay**
(use the school's spare device if needed)

Scan this dose for instructions on how to use adrenaline devices

3. **Immediately dial 999** for ambulance
and say ANAPHYLAXIS (ana-fill-axis)

After giving adrenaline:

- Stay with person until ambulance arrives, do NOT stand them up.
  - Keep them lying down, even if things seem to be getting better.
- Phone parent/emergency contact.

If no improvement after 5 minutes, give another dose of adrenaline using a second device, if available.

Commence CPR at any time if there are no signs of life 

ALWAYS GIVE ADRENALINE DEVICE FIRST if someone has **SEVERE AND SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice). **THEN SEEK MEDICAL HELP. Anaphylaxis can occur without skin symptoms**