



Allergy Safety Policy

School:

Jigsaw Pupil Referral Unit

Date Approved by Management Committee:

Signed by: *D Haines*

Chair: D Haines

Headteacher: Erika Rothlisberger

Review Date: Sept 27

(At least annually and after any serious incident or near-miss)

Purpose and scope

This policy explains how Jigsaw PRU will identify and support children, young people, staff and visitors with allergy; minimise exposure to known allergens; ensure rapid access to emergency medication (including prescribed and “spare” adrenaline auto-injectors); and promote wellbeing and inclusion. It applies to all staff (permanent, temporary, supply, peripatetic and volunteers), catering staff, governors and trustees, and to all on-site activities, off-site visits and trips.

Legal and statutory context

This policy is written in line with the DfE statutory guidance Allergy Safety in Schools (July 2026) and Section 34 of the Children’s Wellbeing and Schools Act 2026 which requires LA-maintained schools, academies and PRUs to have an allergy safety policy. Jigsaw will have regard to that guidance when implementing this policy.

Named responsibilities

- Named senior allergy lead **Erika Rothlisberger – Headteacher**. Responsible for owning the policy, driving implementation, ensuring training, maintaining records and reporting to the management committee.
- First aid lead / clinical lead: **Claire Green** Responsible for storing, checking and replacing emergency medicines and keeping administration logs.
- Designated Safeguarding Lead (DSL): **Erika Rothlisberger**. Ensures safeguarding links where allergies intersect with wider welfare.
- Class staff, admin staff, catering staff and site management staff: follow IHPs, attend required training and act promptly in an emergency.
- Catering lead and external provider: inform senior allergy lead of menus, labelling and safe handling procedures.
- The management committee: ensure the policy is published, resourced and regularly reviewed.

Culture and wellbeing

- Jigsaw will adopt a child-centred approach that balances safety with inclusion. Reasonable adjustments that promote participation and emotional wellbeing will be recorded in Individual Healthcare Plans (IHPs).
- Staff must avoid singling out pupils unnecessarily; any wider awareness activity (for example training friends of a pupil with an AAI) will be discussed and agreed with parents/carers and the child.
- Bullying or discriminatory conduct linked to allergy will be addressed through our relationships and behaviour and safeguarding procedures.

Identification, records and information sharing

- On admission and at regular review points, parents/carers complete medical information. Information is also requested from previous/ dual placements and healthcare professionals as needed.
- Jigsaw will keep a register of all people with known allergy (pupils, relevant staff and regular volunteers), noting allergens, prescribed medicines and whether there is an IHP/Allergy Action Plan. Records are stored securely in line with data protection (special category health data) and shared on a need-to-know basis.

- Copies of any clinical Allergy Action Plans or Asthma Plans will be attached to the pupil's IHP; the IHP will be updated whenever a clinical Action Plan changes.

Individual Healthcare Plans (IHPs)

- Pupils who have allergies that impact their day-to-day school life, carry risk of harm, or require additional arrangements will have an IHP. The IHP records triggers, typical symptoms, daily risk reductions, emergency medicines, agreed self-management arrangements, and arrangements for visits/trips.
- IHPs will be co-produced with parents/carers and, where appropriate, the child and relevant healthcare professionals. IHPs will be reviewed at least annually, or sooner after any incident or change in clinical advice.

Minimising risk (day-to-day and curriculum)

- Staff planning activities (practical lessons, craft, science, music, therapy, animal contact) must consider allergen risks and put reasonable mitigations in place. Where necessary the senior allergy lead will be consulted.
- Measures for food provided by Jigsaw/dispatch kitchen: catering will provide allergen information, follow safe-handling and labelling, and communicate daily menus where appropriate. Catering staff are included in annual allergy training.
- Measures for food brought in by others: Parents/carers of children with known allergies must provide ingredient information or original packaging for any food sent in for that child. Food brought in to share (class treats, events or cake sales) and food provided by visitors must include ingredient lists or packaging and be approved by staff in advance. All children will be supervised at mealtimes, handwashing promoted and food sharing discouraged.; staff supervising communal areas will supervise to reduce sharing and cross-contact. Jigsaw will not use blanket bans unless a clinical risk assessment supports one; exclusions are used only if clinically advised.
- For airborne/contact allergens (pets, latex, certain aerosols) reasonable steps will be taken to reduce exposure; specific mitigations will be recorded in IHPs.
- Hygiene: routine handwashing and surface cleaning procedures to reduce cross-contamination.

Prescribed adrenaline and other emergency medicines

- Pupils prescribed adrenaline auto-injectors (AAIs) must have rapid access to them at all times (including lunch, playground, sports field and off-site). The IHP records who holds the device and whether the pupil may self-carry.
- Parents/carers are responsible for supplying in-date prescribed devices and for replacing them after use or when expired; the school will remind parents when devices approach expiry. Records will show which pupils have prescribed AAI(s) and their Action Plans.

Spare adrenaline devices and storage

- Jigsaw will maintain centrally held “spare” adrenaline device(s) appropriate to the weight/age of pupils on site and in line with clinical guidance. Devices will be stored in clearly marked emergency anaphylaxis kit(s) that contain: two AAIs (a pair), instructions, a salbutamol inhaler and spacer where appropriate, gloves, and a record form.
- Spare devices will be readily accessible and not locked away. Location(s) will be chosen so no pupil is more than five minutes away from an AAI in an emergency; on our site this means (This will be on the shelf in the office.)
- AAIs will be stored in pairs and checked weekly; checks and replacements (after use or on expiry) will be recorded in a spare device log. Used or expired AAIs will be returned to a pharmacy for safe disposal.

Training, induction and competency

- All staff who are on site while pupils are present (permanent, temporary, supply, peripatetic, volunteers and catering staff) will receive allergy awareness and emergency response training at least annually. Training will cover: awareness of allergy types and risks; difference between allergy, intolerance and coeliac disease; recognising allergic reactions and anaphylaxis; how and when to administer AAI and asthma reliever inhalers; location of AAIs; record keeping and reporting; and the school’s policy and IHP system. First-aid training alone is not sufficient.
- New staff (including supply and agency staff who will be on site during pupil time) will receive allergy induction on their first day and confirmation that they have read the allergy policy and any relevant IHP summaries. The senior allergy lead will ensure supply/agency staff receive key briefings.
- Staff who will be expected to administer AAIs will receive practical competency checks and have their competence recorded. Refresher training is scheduled at least annually or sooner if an incident indicates it is needed.

Drills, incidents and near-misses

- Jigsaw will conduct at least one simulated anaphylaxis drill per year. Drills will be planned, recorded and reviewed; results will inform policy and practice. Where pupils are involved, this will be planned with parents/carers and the pupil to avoid adverse impact on wellbeing.
- All allergic reactions, including “near-misses”, will be recorded on the school incident log. Parents/carers will be informed of incidents involving their child. Incident reports will be reviewed by the senior allergy lead and used to update IHPs and school procedures where necessary.

Visits, trips and off-site activities

- Risk assessments for visits will explicitly include allergy risks and mitigations for any pupil at risk of anaphylaxis. Pupils at risk must have their AAI with them; at least one accompanying adult must be trained and competent in AAI use. Spare AAIs should be carried on trips where appropriate. Transport arrangements must ensure emergency medicines are accessible throughout the journey. For overnight stays additional arrangements for storage and access will be recorded in the trip plan.

Information sharing and confidentiality

- Health information is special category data. Jigsaw has a lawful basis to hold and share this information where necessary to safeguard and support the child. Information will be shared on a need-to-know basis, recorded securely and handled respectfully. Parents/carers and children will be involved in decisions about wider sharing of health information. Data handling will follow Jigsaw's data protection policy.

Publication and awareness

- This policy will be published on the Jigsaw website and made available in hard copy on request. A brief summary and staff guidance will be included in the staff handbook. Parents/carers will be informed about the policy at admission and through termly communications. Age-appropriate awareness materials for pupils will be used to reduce stigma and bullying, with parental agreement where pupils are named.

Record keeping, monitoring and governance

- Records kept: IHPs, Allergy Action Plans, training records, administration logs, spare device checks, incident and near-miss records, trip risk assessments. Records will be retained in line with statutory retention schedules and data protection requirements.
- The named senior allergy lead will report annually to the management committee on allergy safety compliance, training completion, incidents and recommended actions. Allergy risk will be included on the school risk register. Management Committee will ensure adequate resourcing and oversight.

Policy review

- This policy will be reviewed at least annually and after any serious incident or near-miss. Reviews will involve parents/carers and pupils where appropriate and take account of incident learning. The senior allergy lead will maintain the review schedule and update the management committee.

Immediate actions required (for SLT)

1. Publish this policy on the website within 14 days.
2. Audit current pupils to identify those with allergies and ensure an up-to-date IHP exists for each within 4 weeks.
3. Confirm locations for spare adrenaline kits so an AAI is reachable within five minutes from all school activity areas and log weekly checks.
4. Schedule whole-staff allergy awareness training and a recorded simulated anaphylaxis drill this term.

Appendices (forms held separately)

- Individual Healthcare Plan (IHP) template and Allergy Action Plan (one-page).
- Spare Adrenaline Stock & Weekly Check Log.
- Medication Administration Log.

- Training & Competency Record.
- Trips & Visits checklist.

Sources

- Allergy Safety in Schools — Department for Education (July 2026).
- Children's Wellbeing and Schools Act 2026 (Section 34) — requirement to hold an allergy safety policy.

Notes

- Where clinical questions arise (for example which dose of AAI is appropriate), Jigsaw will seek clinical advice from the child's healthcare professional. This policy summarises school systems and does not replace clinical judgement.