HULME GRAMMAR SCHOOL
ALLERGIES AND ANAPHYLAXIS POLICY
This policy is applicable from EYFS through to Year 13

An allergy is a reaction by the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis. In anaphylaxis a swollen tongue or throat can cause difficulty speaking / breathing, resulting in wheezing, coughing and a lack of air which can cause fainting/dizziness, collapse or loss of consciousness)

This policy focuses on the need to reduce the risk of harm from food allergies in particular while also recognising other potential causes of anaphylaxis (insect stings, latex, drugs, and exercise).

Where necessary the management of an individual's condition will be outlined in their own Allergy Action Plan, circulated to those who need to know of the risks involved and control measures required.

1. Food Allergens

The 14 allergens required to be declared under Food Standards are:

Celery	Lupin	Sesame
Cereals (containing Gluten)	Milk	Soybeans
Crustaceans (e.g. prawns, crab, lobster)	Molluscs (e.g. mussels, oysters)	Sulphur Dioxide / Sulphites
Eggs	Mustard	Tree Nuts (such as almonds, hazelnuts, walnuts, brazil nuts, etc.)
Fish	Peanuts	

2. Roles and Responsibilities

The management of pupils with allergies forms part of the pastoral responsibilities of the school and therefore involves all with pastoral roles as well as the Catering Team and a general awareness among all staff. The Deputy Principal (Pastoral) will ensure the following occurs:

- Relevant staff are suitably trained and informed to prevent the assist pupils with allergies or who suffer anaphylaxis
- Consider the sharing of necessary information on an individual pupil's allergies with other staff, third parties and fellow students where this is important to minimise the risk.
- Ensuring that specific risk assessments are undertaken where high levels of risk are posed to individual pupils as a result of their medical conditions, and that these are monitored and reviewed; and that
- This policy, and its constituent parts, is regularly reviewed

Staff responsibilities

- All staff will receive and complete allergy awareness / anaphylaxis training, as part of their First Aid Training, every three years, or more often if needed.
- Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the school.

- Staff should be aware of the pupils in their care who have known allergies as an allergic reaction could occur at any time and not just at mealtimes.
- Staff supervising younger pupils with prescribed Adrenaline Auto Injectors (AAIs) (who are not yet able to carry their own), will take responsibility for storing the AAIs with ready access.
- Staff undertaking food-related lessons or activities have responsibility for checking the food allergy status for all the pupils/students involved and taking appropriate precautions as required

Medical Officer Responsibilities

- Supported by the school's admissions staff, they will ensure that the school's information management system is up-to-date with information on pupil allergies supplied by parents, and supply such to the school's catering team.
- They will consider the Allergen Risk Control Matrix and prompt the relevant actions as a result.
- They will ensure that the school maintains a supply of in-date spare Adrenaline Auto-Injectors
- (School's Spare AAIs)
- They will advise colleagues as required on allergy information and precautionary measures.

School Catering Team responsibilities

- Catering staff ensure that food is prepared in accordance with the relevant food standards and legislation.
- While we do not knowingly use nuts or sesame seeds in any of the food we prepare and serve, it is unable to guarantee that dishes/products served are free all allergens including, from nuts, nut derivatives, sesame and sesame derivatives, due to the use of precautionary allergy statements such as 'may contain' which are used by our suppliers.

Parent responsibilities

- On entry to the school, the parents are required to notify the school of any allergies and to complete the Hulme Grammar School Food Allergy Form and Food Allergen Risk Level Matrix.
- Parents of children with Allergy Action Plans must supply the school with a copy, (these should be completed with the assistance of a GP/Allergy Specialist (more information is available from theMedical Officer)
- Parents are responsible for ensuring any medication for the pupil is supplied to the school, and remains "in date" with replacement/s as necessary.
- Keep the school up-to-date with any changes in allergy management, including reviews of any Allergy Action Plan.

Pupil/Student responsibilities

- Pupils/Students will be encouraged to develop a good understanding of their allergies and symptoms and to inform the catering team by using the allergy line. The school will provide a form of identification, such as lanyards or pin badges
- Pupils will be required to use the designated allergy aisle in the dining hall, where they can access food that meets their dietary needs.
- Pupils of sufficient age and maturity Prescribed AAIs will be encouraged to take responsibility for carrying their own Prescribed AAIs on their person at all times with sufficient training and confidence in their administration.
- Allergy awareness for students will form part of the planning for PSHE sessions

3. Medication – Adrenaline Autoinjectors (AAIs) etc.

Medication will be stored in a red medical bag clearly labelled with the pupil's name and will contain:

- Two AAIs (e.g. EpiPen® or Jext® or Emerade®)
- An up-to-date Allergy Action Plan

- Antihistamine as tablets or syrup (if included on Allergy Action Plan)
- Asthma inhaler (if included on Allergy Action Plan).

4. Nuts

The school intends to keep nuts and all products including nuts as ingredients off-site as far as is practicable.

The school does not knowingly use nuts or sesame seeds in any of the food we prepare and serve, it is unable to guarantee that dishes/products served are free from all allergens including, from nuts, nut derivatives, sesame and sesame derivatives. For this reason food suppliers often still use precautionary allergen statements such as “may contain nuts” “may contain traces” and “produced in a factory that handles nuts”.

5. Off-Site Activities

Staff organising the activity/trip/visit are provided with a list of pupils with relevant medical needs, including those known to be at risk of anaphylaxis.

Older pupils who have been prescribed an AAI should carry their two Prescribed AAIs (plus inhaler/antihistamine, where relevant) with them. For younger pupils, the class teacher will give the Prescribed AAIs (plus inhaler/antihistamine, where relevant) to the member of staff supervising the activity/trip/visit.

6. Benedict Law

From September 2026, all schools in England are required to follow strengthened statutory guidance on allergy safety. Hulme Grammar is committed to taking all reasonable steps to identify, assess and manage the risks associated with allergies and anaphylaxis and to ensure that pupils with allergies are able to participate safely and fully in school life. In line with current Department for Education allergy safety guidance, including the principles commonly referred to as Benedict’s Law, the School adopts a whole-school approach to allergy management focusing on prevention, communication, staff training, emergency response and post-incident review.

Hulme Grammar recognises that severe allergic reactions may be caused by any allergen and are not limited to the 14 allergens subject to statutory food information requirements. Parents and carers must therefore provide the accurate and up-to-date information about any diagnosed or suspected allergy, including relevant medical advice, prescribed medication and emergency treatment plans. Where appropriate, an Individual Healthcare Plan will be put in place and shared with relevant staff. The School will maintain clear and accessible records of known allergies, ensure that appropriate staff receive allergy and anaphylaxis training, establish effective controls within catering and other relevant activities, and ensure prompt access to prescribed adrenaline auto-injectors and any emergency adrenaline auto-injectors held by the School in accordance with applicable requirements.

All staff are expected to take allergy risks seriously, follow agreed procedures, act promptly where an allergic reaction is suspected and summon emergency medical assistance without delay where anaphylaxis is suspected. Any serious allergic reaction, administration of adrenaline, near miss or significant breach of allergy controls will be recorded, reported to the appropriate senior member of staff and reviewed so that lessons can be identified and, where necessary, procedures, risk assessments, training or individual support arrangements strengthened.

Appendices

APPENDIX A: Allergen Control Matrix

The school uses the following Risk Levels to consider its food allergen management and to identify special dietary requirements. The Risk Levels are defined below:

Risk Level	Risk Description	Risk Controls
Level 1	The individual has a severe life threatening allergy/ anaphylactic shock. They do not need to be in direct contact with diagnosed allergens e.g. airborne or have multiple sensitivities beyond the 14 major allergens (listed earlier).	A bespoke risk assessment and risk controls to be agreed in consultation with relevant stakeholders.
Level 2	The individual has a severe life threatening allergy/ anaphylactic shock if in contact with the diagnosed allergen or more than 3 sensitivities/ allergens.	A bespoke risk assessment and risk controls to be agreed which may include: • Food prepared separately in designated areas.• Food stored in a separate hotplate/ separate dedicated container. • Persons preparing or serving food change their gloves beforehand. • Food plated with separate utensils. • All food that is provided is recorded and double checked by an additional member of the team.
Level 3	The individual has a severe life threatening allergy/ anaphylactic shock if they ingest the diagnosed allergen	A bespoke risk assessment and risk controls to be agreed which may include: • Food prepared separately in designated areas. • Food stored in a separate hotplate/ separate dedicated container. • Persons preparing or serving food change their gloves beforehand. • Food plated with separate utensils. • All food that is provided is recorded and double checked by an additional member of the team.
Level 4	The individual becomes very unwell if they ingest a food, diagnosed as allergic or intolerant but does not go into anaphylaxis e.g. coeliac.	Information on the ingredients readily available • Ensure that there is a good variety of suitable choices at each serving period • Food stored on separate hotplate/ in separate container • Persons preparing food change their gloves beforehand • Food plated with separate utensils
Level 5	The individual experiences minor ill health if they ingest food which they are known to be intolerant (e.g. nausea).	Information on the ingredients readily available. • Ensure that there is a good variety of suitable choices at each serving period.
Level 6	The individual experiences no ill-health after they ingest their food but wishes to avoid certain food for religious, cultural or moral / beliefs reasons.	Ensure that there is a good variety of suitable choices at each serving period.
Level 7	No risk – Can eat all food types	

Appendix B

‘Spare’ adrenaline auto-injectors in school

Hulme Grammar School has purchased 6 spare AAIs for emergency use in children who are at risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date).

These are stored in a red ‘Emergency Anaphylaxis Response Kit’, kept safely, not locked away and accessible and known to all staff.

Hulme Grammar School holds 6 spare pens which are kept in the following locations:-

- Kitchen
- Prep
- Reception
- Medical Office
- Sports Hall
- Swimming Pool
- Food & Nutrition Rooms

The Medical Officer is responsible for checking the spare medication is in date on a monthly basis and to replace as needed.

Written parental permission for use of the spare AAIs is included in the pupil’s Allergy Action Plan.

If anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

Appendix C

EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

A severe allergic reaction can cause swelling of the mouth, tongue and throat leading to difficulty breathing and collapse (known as anaphylactic shock).

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS

ASSESS THE SITUATION
Send someone to get the emergency kit

MILD REACTION

Minor swelling of the face / lips
Itching of the Skin / Rash
Nausea

ACTION

Contact parents
Give antihistamine –
Monitor child until you are happy he / she has returned to normal
If symptoms worsen see – SEVERE REACTION

SEVERE REACTION

Difficulty Breathing/coughing/choking
Severe swelling of lips / eyes/ face
Pale / floppy
Collapsed / unconscious
Send someone to telephone 999 for an ambulance – as set out in emergency telephone procedure overleaf.
Start the ADRENALINE AUTO-INJECTOR procedure set out overleaf

Lie the child down and remove their trousers if they are made of thick material.

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Take ADRENALINE AUTO-INJECTOR – remove cap

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Jab INJECTOR firmly into outer aspect of mid-thigh.

MAKE SURE A CLICK IS HEARD.

Hold INJECTOR in place for 10 seconds (make a note of the time)

Massage the area for 10 seconds.

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Remain with child until the ambulance arrives

NB Give used Adrenaline Injector to ambulance staff.

EMERGENCY

TELEPHONE PROCEDURE

1. **DIAL 999**. Tell the operator you need an ambulance immediately. Tell them you have a case of anaphylaxis (ana-fil-ac-sis) and that a child is having difficulty breathing and is losing consciousness.

2. **Phone Medical Officer on 1999 or Reception on 0.** Tell them you have an emergency with a child having an anaphylactic reaction.

3. Contact parents

Governor with oversight responsibility: Andrew Coyne

Allergies and Anaphylaxis Policy Reviewed: September 2026

Next Review Due: September 2027