



KINGS NORTON

GIRLS' SCHOOL & SIXTH FORM

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ALLERGIES SAFETY POLICY

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INTRODUCTION

Section 34 of the Children's Wellbeing and Schools Act 2026 requires that LA maintained schools, academies and PRUs must have an allergy safety policy.

Kings Norton Girls' School wishes to ensure that the culture of the school ensures awareness, minimises risk and ensures training so that students with allergies receive appropriate care and support at school in order that they can stay safe and access a world of opportunities. Kings Norton Girls' School places a clear emphasis on meeting the needs of students with SEND and Disabilities and this includes students with medical conditions. This policy should be read in conjunction with section 100 of the Children and Families Act 2014, Equality Act 2010, DfE Statutory guidance 'Supporting students at school with medical conditions' December 2015 (updated august 2017) and the current SEND code of practice. Allergies Safety Policy is based on the DfE guidance on Allergy Safety in Schools (2026), The Department of Health and Social Care guidance on using emergency adrenaline auto-injectors (AAIs) in schools and The Food Information Regulations 2014 with the Food Information (Amendment) (England) Regulations of 2019.

RATIONALE

Students at Kings Norton Girls' School and Sixth Form with allergies will be properly supported so that they have full access to education, including educational visits. Clear arrangements are in place in school to support students at the school with allergies, so that they can play a full and active role in school life, remain healthy and achieve their academic potential. The school will consult as appropriate with health and social care professionals, parents/carers and students to ensure that the needs of students with allergies are effectively supported in order to receive a full education. This policy is available to parents/carers, staff and other partners on the school's website or on request from the school office. A copy of the policy will be included in the letter to parents/carers inviting them to contribute to the development of the individual healthcare plan (IHP) for a child with allergies.

The Allergies Safety Policy sets out the school approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction. It

makes clear how our school supports students with allergies to ensure their wellbeing and inclusion. It promotes and maintains allergy awareness among the school community.

PURPOSE

The purpose of this policy is to explain how Kings Norton Girls' School & Sixth Form implements its procedures on supporting students who have allergies, in line with government requirements and guidance, with a view that all students will receive the best education possible for them, stay safe, opening a world of opportunities, despite any allergies that they may have to contend with

ROLES AND RESPONSIBILITIES

Supporting a student with allergies during school hours or on school visits is not the sole responsibility of one person. A school's ability to provide effective support will depend to an appreciable extent on working cooperatively with other agencies. Partnership working between school staff, healthcare professionals, social care professionals, local authorities, parent/carers and students is critical. Some of the most important roles and responsibilities are listed below.

Allergy lead

- The Deputy Head (Students) is the allergy lead and
- Will promote and maintain allergy awareness across school
- Ensure accurate, up to date and appropriate recording and collation of the allergy register including level of need (mild or risk of anaphylaxis) along with special dietary information or allergens for all students with allergies. This includes gaining information from new starters in times of transition (including new Year 7, student joining in-year or new Year 12)
- Ensure this is communicated to all appropriate staff including catering staff.
- Ensure all staff have the appropriate level of allergy training, including but not limited to annual training on anaphylaxis. This includes drills which should be recorded in similar way to a fire drill. Staff should also be aware of how to report incidents of allergic reaction whether allergic reaction or anaphylaxis (whether incident or 'near miss')
- The Allergies Safety Policy and training is included in new staff induction
- Ensure all staff are aware of both policy, procedures and students with allergies including where visits or in-school risk assessments are needed.
- Regularly review the school stock of the school's adrenaline auto-injectors (AAIs)
- Will review all incidents of allergic reactions including near misses with findings to inform policy updates and staff training.

The role of Parents/carers

- Will notify the school of their child's allergies and provide the school with sufficient and up-to-date information about their child's medical needs.
- Parents/carers are key partners will participate in discussions about the development and review of their child's individual healthcare plan and carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment.
- Will ensure they or another nominated adult are contactable at all times.
- Will ensure that any medication supplied has a clear prescription label and the relevant consent form completed.
- Will update the school nurse team if any changes need to be made to an allergy action plan
- Will ensure that they are aware of the school's Allergies Safety Policy, providing up to date information, dietary requirements along with any history of allergies, reactions and anaphylaxis

The role of the School Board

- The School Board is ultimately responsible for the implementation of this policy.
- The Board will ensure that arrangements are in place to support students at school with allergies. In doing so it should ensure that such children can access and enjoy the same opportunities at school as any other child. Ensure that the arrangements give parents and students confidence in the school's ability to provide effective support for allergies in school.
- The School Board will ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support students at school with allergies to enable the fullest participation possible in all aspects of school life.
- The School Board are aware of how a student with allergies impacts on their school life and they focus on the needs of each student with a medical condition primarily through the use of the individual healthcare plan (IHP).
- The School Board ensure that sufficient staff have been properly trained and are competent to provide the support that student with allergies and ensure that staff do not give prescription medicines or undertake health care procedures without appropriate training and parental/carers consent if under 16 (updated to reflect any IHPs).
- Allergies policies and procedures are readily accessible to parent/carers and staff.

The role of the Headteacher

- Ensures that the school's Allergies Safety Policy is developed and effectively implemented with partners.
- The headteacher is in charge on a day-to-day basis and ensures that named individuals are responsible for the provision of support to individual students with allergies.
- Where students have disabilities and/or special needs, as well as a medical condition, these will be taken into consideration at all times by the headteacher.

The headteacher will ensure that:-

- Training needs are assessed, commissioned and provided by appropriate trainers.
- Sufficient staff are suitably trained and available to implement the policy.
- All staff are aware of the policy and their role in implementing it. Relevant staff will be made aware of any child with allergies.
- The school nurse is aware of any child who has an allergy that may require support at school where known, and is also aware of any child with a medical condition who has not yet had a formal diagnosis.
- Staff roles are reviewed annually when IHPs are reviewed or when the needs of a student change.
- Staff are appropriately insured, are aware that they are insured to support students with allergies and able to examine insurance policies relating to providing support to students with allergies should they wish to.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable always include consideration for any child with an allergy
- Individual healthcare plans (IHPs) are initiated, monitored and reviewed at least annually. Action plans in the form of a summary card are also arranged with the school nurse, GP or other medical professionals and displayed in the staff room to inform all staff members.
- The focus of support is on the needs of each individual child and how their allergy impacts on their school life.
- Consideration is given as to how children will be reintegrated back into school after periods of absence due to their medical condition.

The school considers the risk of allergens along with mitigation measures and communication across the school community

The role of school staff

- Any member of staff may be asked to support students with allergies so that, wherever possible, they can participate as best they can in school trips and visits, or in sporting activities, and not be prevented from doing so.
- Administering medicines is not part of teachers' professional duties but they are expected to take into account the needs of students with allergies that they teach. Whenever staff administer medicine they will follow the school's policy on administration of medicines and ensure that they have documented their procedures. All school staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with allergies.
- Any member of school staff should know what to do, and respond accordingly, when they become aware that a student with allergy needs help.
- When the school is made aware of a change to a medical condition, or a new diagnosis occurs, the case will be referred to the school nurse, if high risk of anaphylaxis, in order for an 'Allergy Action Plan and Alert Card to be shared with staff and displayed in the staff room.
- The school seeks consent from parents/carers for the use of AAls to be used in the event of an emergency.

The role of the school nurse

- The school has access to the school nursing service which is responsible for notifying the school when a child has been identified as having an allergy which will require support in school. Wherever possible, this will be done before the child starts at the school.
- The school nursing service will liaise between medical practitioners and school staff on implementing a child's IHP and provide advice and training.
- In the case of allergies, the school nurse will support with an appropriate Allergy Action Plan

The role of other healthcare professionals, including GPs and paediatricians

- The GP or other healthcare professional will notify the school nurse when a child has been identified as having an allergy that will require support at school.
- They may provide advice on developing individual IHPs.
- Specialist local health teams are also available to provide support for children with particular conditions (e.g. asthma, diabetes).

The role of the individual student in managing their own medical needs

- Students with allergies will often be best placed to provide information about how their allergy affects them.
- Students with allergies will be fully involved in discussions about their medical support needs.
- Students are expected to contribute as much as possible to the development of, and comply with their IHP. Other students will often be sensitive to the needs of those with allergies.
- After discussion with parents/carers, students who are competent will be encouraged to take responsibility for managing their own medicines and procedures and this will be reflected in their IHP.

- Students will only be allowed to carry prescribed anti-histamine tablets, asthma inhalers, AAI's and relevant devices and therefore will be able to access their medicines for self-medication quickly and easily.
- All medicines will be stored safely. Students will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as adrenaline pens will always be readily available to students and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips.
- School will only accept relevant in date medication, prescribed by a GP, labelled and provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. Medication prescribed by a GP, including AAI's are stored in the main school office. Expiry dates are reviewed at least termly and parents/carers are prompted to provide replacement medication based on expiry dates. Medicines are stored securely in the main school office unless specific requirements are needed.
- The school office holds at least TWO spare AAI's, for emergency use as directed by the emergency services so that no child is more than 5 minutes from access to an AAI. 'Spare' AAI's will be stocked and stored in pairs. Out of office hours, the site staff will have access to the AAI's and contact is clearly displayed in the school office where medicines are kept.
- If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them. If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the IHP. Parents/carers will be informed so that alternative options can be considered unless in an emergency situation.

INDIVIDUAL HEALTHCARE PLANS (IHPS)

Many students with allergies will require an IHP which will help to ensure that each student's allergies are supported. The school, healthcare professionals and parents/carers will agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher will take a final view.

- IHPs may be initiated, in consultation with the parent/carer, by a member of school staff or a healthcare professional involved in providing care to the child. Those involved will agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.
- IHPs will be drawn up in partnership between the school, parents/carers, and a named relevant healthcare professional who can best advise on the particular needs of the child. Students will also be involved whenever appropriate.
- The Headteacher has overall responsibility for the development of IHPS. IHPs will be developed with the child's best interests in mind.
- IHPs will ensure that the school assesses and manages risks to the child's education, health and social well-being and minimise disruption.
- When a child is returning to school following a period of hospital education or alternative provision (including home tuition) the school will work with the LA and education provider to ensure that the IHP identifies the support the child will need to reintegrate effectively.
- The IHP will state the steps which the school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education. The format of IHPs will vary to enable the school to choose what is most effective for the specific needs of each student, and the level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. However, all will contain the following information:
 - The allergy, its allergens, signs, symptoms and treatments.

- The student's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink (where this is used to manage their condition), dietary requirements and environmental
 - Arrangements for support
 - Specific support for the student's educational, social and emotional needs – e.g. how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
 - Level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication this will be clearly stated with appropriate arrangements for monitoring.
 - Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional.
 - Cover arrangements for when the usual support person is unavailable.
 - Who in the school needs to be aware of the child's condition and the support required.
 - Arrangements for written permission from parents/carers and the Headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours. Parents/carers will have a copy of the procedures to be followed when administering medicines as part of managing medicines on school premises (see section below).
 - Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, eg risk assessments.
 - Where confidentiality issues are raised by the parent//carer/child, the designated individuals to be entrusted with information about the child's condition.
 - What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their IHP.
- IHPs will be easily accessible to all who need to refer to them while preserving confidentiality.
 - Where a child has SEND but does not have an Education, Health and Care (EHC) Plan, their SEND needs will be mentioned in their IHP.
 - Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

A flow chart for identifying and agreeing the support a child needs and developing an IHP is provided at **Appendix A**.

A letter inviting a parent/carer to an IHC development meeting is at **Appendix B**.

A template for a student's healthcare plan is provided at **Appendix C**.

The forms provided to parents/carers seeking the relevant consent for the administration of medication on school premises are found in **Appendix D** and **E**.

The form used by staff to record the administration of medication to a student is found in **Appendix F**.

How to contact emergency services can be found in **Appendix G**.

MANAGING MEDICINES ON SCHOOL PREMISES

At KNGS non-prescribed medicines e.g. anti-histamines are never administered without first checking maximum dosages and when the previous dose was taken. The prior consent of

parents/carers is required if possible and they will, in any case, be informed. Aspirin is never given unless prescribed by a doctor.

Similarly, no child will be given prescription medicines without their parent/carer's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents/carers. In such cases, every effort will be made to encourage the student to involve their parents/carers while respecting their right to confidentiality.

For any child who will need to have medicine administered at school on a regular basis, an Individual Healthcare Plan (see flow chart in Appendix A) will be drawn up in consultation with the school, parents/carers and health professionals. The healthcare plan will outline the child's needs and the level of support required in school. It will be reviewed at least annually.

Under the Management of Health and Safety at Work Regulations 1999 covering the administration of medicines no child under 16 will be given medicines without their parent/carer's written consent so any parent/carer wishing their child to have medication administered must complete the relevant forms (see Appendix D and E). The Headteacher must agree in writing to the request by countersigning the forms shown in Appendix D and E. All medicine will normally be administered during breaks and lunchtimes. If, for medical reasons, medicine has to be taken during the day, arrangements will be made for the medicine to be administered at other prescribed times. Students will be told where their medication is kept and who will administer it.

Children may administer their own medicines if they are considered able to do so and if the parent/carer has completed the relevant consent form. If this is the case, then staff need only to supervise the action.

If a child refuses to take medicine, staff must not force them to do so, but will note this in the records along with the reasons for refusal and any action then taken by the staff member. Parents/carers will be informed of the refusal as soon as possible on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed – See 'Contacting emergency services' (Appendix G).

RECORD KEEPING

Records offer protection to staff and students and provide evidence that agreed procedures have been followed. Parents/carers will be informed if their child has had an allergic reaction at school. Where students are new to the school, for example new Year 7, new Year 12 or in-year transfers or managed moves, parents and carers and previous settings will be asked to provide information on allergies.

A student medical form must be completed by the parent/carer each time there is a request for medication to be administered (see Appendix D and E). This form must detail all valid information and must include:

- Student's name and date of birth
- Reason for the request.
- Name, strength and quantity of medicine provided.
- Clear dosage instructions.
- Date medication received.
- How much medication is to be administered.
- Start date of course of treatment where appropriate
- End date of course of treatment where appropriate
- Emergency contact names and telephone numbers are available on SIMS.

- Where allergies are relevant, details of allergens, reactions and treatment plans

MANAGING RISK FOR ALLERGIES

- Catering – The school will ensure that catering staff have appropriate training and are able to identify students with allergies accurately through timely and up to date communication. Menus will be available for parents/carers to view ingredients and allergen information displayed on all packaged foods. Catering staff will have up to date information on student allergies and use this on the cashless system to flag and prevent purchase of allergens.
- Catering staff will have a list of students with allergies, the relevant allergens and photos of students with high-risk of anaphylaxis.
- The school will ensure that staff in the Food Technology department will have appropriate training and are able to identify students with allergies accurately through timely and up to date communication. Menus will be available for parents/carers to view ingredients and allergen information displayed on all packaged foods if provided. Alternatives will be considered and used when needed.
- Food restrictions – We acknowledge that it is impractical to enforce an allergy-free school but will communicate regularly with members of the school community where appropriate to remain actively aware of the risk posed by food allergens.
- Where students have known allergy to airborne or contact allergens, the school will put reasonable measures in place to manage the risk of the student being exposed to such allergens.
- Staff planning any activity should consider the risk of exposure to allergens, for example in Art, Textiles, Food, Science.
- School visits will include specific risk assessments to manage the risks of exposure to allergens for students when planning external visits or trips.

SCHOOL TRIPS AND SPORTS ACTIVITIES

At Kings Norton Girls' School and Sixth Form students with allergies are encouraged to participate in school visits, or in sporting activities, and will not be prevented from doing so wherever possible. Teachers will be aware of how a child's allergies will impact on their participation, but there will be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments.

School will make reasonable adjustments for the inclusion of students in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible. A risk assessment will be undertaken so that planning arrangements, with any reasonable adjustments, take account of any steps needed to allow all children to participate according to their own abilities. Parents/carers and students will be consulted and advice taken from the relevant healthcare professional to ensure that students can participate safely, if at all. Risk assessments will explicitly include allergy risks

EMERGENCY PROCEDURES

As part of general risk management processes, school has arrangements in place for dealing with emergencies for all school activities, wherever they take place, including on school visits within and outside the UK.

Students in the school will know to inform a member of staff immediately if they think help is needed. Staff will follow the school's procedures to contact emergency services if necessary. Where a student has an Individual Healthcare Plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the school will know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a student needs to be taken to hospital, staff will stay with the student until the parent/carer arrives, or accompany a student taken to hospital by ambulance if parents/carers cannot be contacted. The member of staff will stay at the hospital until an appropriate family member can provide appropriate care.

Emergency inhalers of the type salbutamol inhalers are held in school for use only in emergencies. The inhalers may only be used by children whose parents/carers have agreed the use of the emergency inhaler and who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler will be used if the student's prescribed inhaler is not available (e.g. because it is broken, or empty).

Information relating to how to contact emergency services are printed on orange card and displayed near each phone throughout the school.

In some cases, the impact of exposure to an allergen while in an education setting may not be recognised the child or young person is back at home. It is therefore important that the child or young person, their parents or others (for example healthcare professionals) can report that there has been an incident.

ALLERGIC REACTION PROCEDURES

- As part of the whole school awareness approach to allergies, all staff are trained in the school's allergic reaction procedures, and to recognise the signs and of anaphylaxis and respond appropriately. This includes emergency simulations with drills and practical rehearsal. The results of these drills should be recorded in a similar way to that of a fire drill. In some cases, it may be appropriate to include young people in such drills, for example where one of their peers has a high risk of anaphylaxis.
- Staff are trained in the administration of AAIs to minimise the delays in students receiving AAIs in the event of an allergy emergency
- In the event of an emergency, if the student does not have an AAI, the school AAI device will be used

INSURANCE AND INDEMNITY

Kings Norton Girls' School staff are permitted to undertake basic medical procedures and, as long as they have been adequately trained, will be covered under the school's public liability insurance policy accordingly.

STAFF TRAINING AND SUPPORT

All staff present during times when pupils are scheduled to be on site should receive allergy awareness training. This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It includes others who may oversee students in after school clubs. It is not intended to include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

Training, at least annually, is undertaken so that all staff are aware of the school's Appraisal Policy and their role in implementing this and to also keep them up-to-date with procedures to be followed. This will make use of the School Nurse Service and other training including scenario based training. Staff will be made aware of the need to actively support students with allergies to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

New staff will receive training through their induction process. The named relevant healthcare professional advises the school on training that will help ensure that all allergies

affecting students in the school are understood fully and to fulfil the requirements as set out in IHPs.

Within training staff will:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it;
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist;
- Understand the difference between food allergy, coeliac disease and food intolerance;
- Know where to find information on allergy triggers;
- Can identify the range of symptoms of allergic reactions;
- Understand and can recognise anaphylaxis;
- Know how to respond in an emergency, including:
 - calling emergency services and informing parents;
 - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
 - training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);
- Understand the impact allergy can have on a child or young person's wellbeing;
- Understand the school, college or setting's Allergies Safety Policy;
- Know how to check whether an individual is on the record of those with known allergy and how to use an Allergy or Asthma Action Plan;
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens;
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a "near miss").

Training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

It will be considered how allergy safety and awareness will be raised among students. Where children and young people are prescribed adrenaline devices, it may be appropriate for their friends to be made aware of how to seek help in an emergency. Any wider awareness or training should be considered carefully and discussed with the student and their parents/carers, and should not replace staff emergency response arrangements.

During the development of IHPs suitable training requirements for staff who will be involved with the individual student will be discussed. Staff who provide support to students with allergies will be included in meetings where this is discussed. The relevant healthcare professional will normally lead on identifying, and agreeing with the school, the type and level of training required, and how this can be obtained. Schools may choose to arrange training themselves and will ensure this remains up-to-date. Once trained, the healthcare professional will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication. On reviewing the IHP any further training requirements for staff will be discussed.

The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents/carers will be asked for their views. They should provide specific advice, but should not be the sole trainer.

Once the SENCO or Deputy Headteacher (students) has been informed by the school nurse or parent/carer of a specific medical condition, which may need either a healthcare plan or specific actions relating to care, the school nurse will advise on training and jointly commission adequate training with the cooperation of the School Health service. The SENCO or Deputy Headteacher will relay this information to the Office Manager to ensure procedures are put in place.

Kings Norton Girls' School understands that the following behaviour is unacceptable:-

- Preventing students from easily accessing their inhalers and medication and from administering their medication when and where necessary.
- Assuming that students with the same condition require the same treatment
- Not considering the views of the student and/or their parents/carers. Ignoring medical evidence or opinion (although this may be challenged).
- Sending students with allergies home frequently for reasons associated with their medical condition, or preventing them from taking part in activities at school unless this is specified within their IHP
- Sending a student with a medical condition to the school office or medical room without being accompanied, or with someone unsuitable. Penalising students for their attendance record if their absences are related to their medical condition e.g. hospital appointments. Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support, including toilet issues, unless it is necessary to do so.
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, based on medical need.

Staff may face disciplinary action if any such instances are brought to the attention of the Headteacher.

CONFIDENTIALITY

In compliance with the general data protection regulation (GDPR) KNGS offers a privacy notice which explains to parents how the school may use and share confidential medical and other information which is held concerning their child. For students over the age of 13, there is a similar privacy notice available.

COMPLAINTS

Should parents/carers or students be dissatisfied with the support provided they should in the first instance, contact the senior leader designated to oversee allergies (Deputy Headteacher, Students). If for whatever reason this does not resolve the issue, they may make a formal complaint, in line with the school's complaints procedure which is available on the school website.

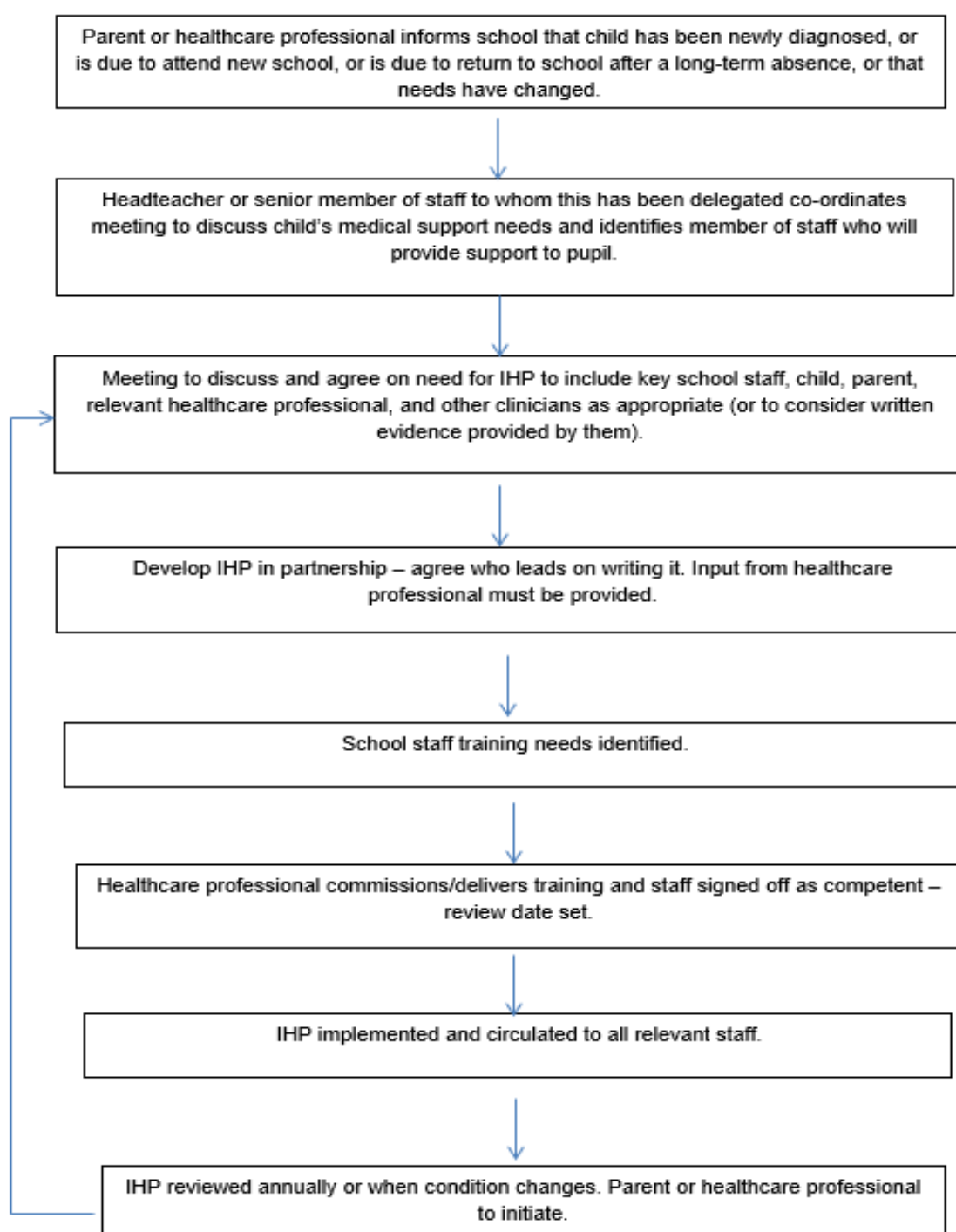
OTHER RESPONSIBILITIES

- **SENCO:** Development, monitoring and review of Individual Healthcare Plans (review at least annually).
- **Health and Safety Officer:** Storage of medication; on-going training; risk assessment for off-site activities
- **Office Manager:** Responsible in ensuring the management of stored medicines/date checks are carried out on a termly basis (procedures relating to the school's administration of medicines on site are carried out by the School Office Supervisor).

OTHER RELEVANT DOCUMENTS

- Supporting Students with Medical Conditions Policy
- Attendance Policy (from September 2023)
- Special Educational Needs Policy
- Safeguarding and Child Protection Policy
- Educational Visits Policy
- Health and safety Policy
- Equality Policy
- GDPR Policy
- Equality in Exams Policy
- Exams Policy
- Complaints Procedure

APPENDIX A: Process for Developing Individual Healthcare Plans



APPENDIX B: Letter inviting parent/carers to contribute to the development of an IHP development

Dear Parent/Carer

Developing an individual healthcare plan for [child's name]

Thank you for informing us of [child's name]'s allergies. For your information I enclose a copy of the school's policy for supporting students with allergies.

An individual healthcare plan (IHC) may need to be prepared, setting out what support [child's name] needs and how this will be provided. IHCs are developed in partnership between the school, parents/carers, students, and the relevant healthcare professional who can advise on [child's name]'s case. The aim is to ensure that we know how to support [child's name] effectively and to provide clarity about what needs to be done, when and by whom.

Although IHCs are likely to be helpful in the majority of cases, it is possible that [child's name] will not require one. We will need to consider how [child's name]'s allergies impacts on his/her ability to participate fully in school life, and the level of detail within the plan will depend on the complexity of [child's name]'s condition and the degree of support needed.

A meeting to start the process of developing [child's name]'s IHC has been scheduled for [date]. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist. Please provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached IHC template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or student support] would be happy for you to contact me [them] by email or telephone if this would be helpful.

Yours sincerely

Attached: Individual healthcare plan form for completion.

APPENDIX C

NAME – Individual Healthcare Plan for allergy	
Created by School Nurse or Healthcare Professional	
Date of birth:	Current photo
Year / class:	
Emergency contacts:	
Staff who need to be aware:	
Allergy: <i>Note what allergy the child or young person has.</i> <i>Note any known allergens.</i> <i>Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.</i>	
How the allergy is managed: <i>Note any care or action plans or prescribed medication issued by healthcare professionals.</i> <i>If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.</i> <i>Note the extent to which the child or young person is able to take responsibility for managing their allergy.</i>	
Impact on education: <i>Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.</i> <i>Indicate how the allergy may impact on the child or young person's learning.</i> <i>Indicate how the allergy may impact on the child or young person's emotional wellbeing.</i> <i>If relevant, note any interaction between allergy and SEN.</i>	
Arrangements for support: <i>Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.</i> <i>Outline measures to reduce the risk of contact with known allergens.</i> <i>Give details of the specific support or adaptations to manage food allergy at meal and snack times.</i> <i>Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.</i>	
Visits and trips: <i>Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.</i> <i>Note any requirement for a risk assessment and prompts for specific issues which should be considered.</i>	
Emergency response: <i>Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.</i> <i>Otherwise summarise the signs or symptoms which would indicate an emergency.</i>	

Set out what to do in an emergency, including whom to contact. If relevant, note where “spare” adrenaline devices are located.	
Last discussed with parents:	Date
Issued by:	Date:
Next planned review:	Date:

NAME – Individual Healthcare Plan for allergy	
Annex: Medication needed while in school / college / setting	
Non-prescription medication: Record any <u>non</u> -prescription medication (e.g. oral antihistamines) which the child or young person may require to manage their allergy in the education setting Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.	
Parental consent:	Date:
Prescription medication: Record any prescription medication for allergy prescribed by a healthcare professional (e.g. adrenaline). Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access. Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.	
Prescribed by:	Date:
Parental consent:	Date:
Use of “spare” adrenaline devices: Note whether parental consent has been given to administer adrenaline (e.g. using “spare” adrenaline devices) in an emergency.	
Parental consent:	Date:
Use of “spare” salbutamol inhaler: If relevant (i.e. the child or young person is prescribed an asthma reliever inhaler), note whether consent has been given to use a “spare” salbutamol reliever inhaler.	
Parental consent:	Date:

APPENDIX D: REQUEST TO SCHOOL TO HOLD MEDICATION AND ALLOW STUDENT TO SELF-ADMINISTER MEDICATION

The school will not give your child permission to self-administer unless you complete and sign this form **and** the Headteacher has agreed to self-administration.

Personal details

Name of student:
Contact telephone number:
Condition or illness:

Medication

Name/type of medication:(as described on the container)
Special storage requirements:
Date dispensed:
For how long will your child administer this medication?

Full directions for use

Dosage:
Frequency/timing:
Method:
Any particular problems with administration?
Side effects:

Parental declaration

I will ensure that the appropriate staff members are aware when medicine arrives at school. I will complete another form if any of the above information changes.

Signature:

Date:

Relationship to child:

<i>For school office use only</i>	
Date received:	Name:
Signature:	
Countersigned and dated by Headteacher:	

APPENDIX E: PARENT/CARER REQUEST FOR SCHOOL TO ADMINISTER OR SUPERVISE THE TAKING OF MEDICATION

School cannot give your child medicine unless you complete and sign this form **and** the Headteacher or nominated named person has agreed that school staff can administer the medication.

Personal details

Name of student:
Contact telephone number:
Condition or illness:

Medication

Name/type of medication: (as described on the container)
Special storage requirements:
Date dispensed:
How long will your child take this medication?

Full directions for use

Dosage:
Frequency/timing:
Method:
Any particular problems with administration?
Side effects:

Parental declaration

I will ensure that the appropriate staff members are aware when medicine arrives at school. I will complete another form if any of the above information changes.

Signature:

Date:

Relationship to child:

For school office use only

Date received:

Name:

Signature:

Countersigned and dated by Headteacher:

APPENDIX F: RECORD OF ADMINISTRATION OF MEDICATION TO A STUDENT

Name of Student:

DOB:

Year group:

Has appendix C or D of the medication policy been completed and signed by a parent:

Yes No

How is this medication to be administered:

Self-administration

Supervised self-administration

Staff administration

Date medication received:

Name of the medicine:

Amount received:

Reason for medication:

Person responsible for administration:

Start date of course of treatment:

End date of course of treatment:

Dosage and frequency (taken from pharmacy label):

Date	Time taken or mark refusal	Dosage	Signature	Name	Witness Signature	Witness Name

APPENDIX G: CONTACTING EMERGENCY SERVICES 999

Dial 9 for an outside line

Dial 999 - ASK FOR AMBULANCE SERVICE AND BE READY WITH THE FOLLOWING

1. Request AMBULANCE

TO KINGS NORTON GIRLS SCHOOL

2. School number **0121 675 1305**

3. School location

**Selly Oak Road
Kings Norton
Birmingham
B30 1HW**

4. GIVE EXACT LOCATION OF THE CASUALTY IN THE SCHOOL

5. GIVE YOUR NAME

INFORM AMBULANCE CONTROL OF THE NEAREST ENTRANCE TO THE CASUALTY'S LOCATION

DIRECT A MEMBER OF STAFF TO MEET THE AMUBLANCE CREW AND TAKE THEM TO THE CASUALTY

SPEAK CLEARLY AND SLOWLY AND GIVE A BRIEF DESCRIPTION OF THE MEDICAL EMERGENCY AND BE READY TO REPEAT INFORMATION IF ASKED

NOTE: THE CALLER MAY BE REQUIRED TO STAY ON THE PHONE TO RECEIVE ADVICE FROM AMBULANCE CONTROL