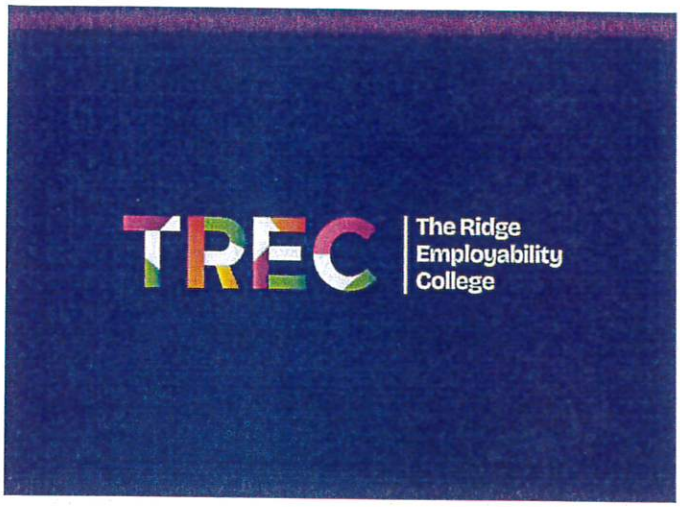


67 – Allergy Safety Policy

Date ratified: 7th October 2026

Date policy to be reviewed: October 2027

Committee responsible for policy:
The Board

Geraldine Kelly — Chair of The Board

Review No.	Date	Summary of Changes	Reviewer
1	7/10/26	New Policy	DW/JW

Contents

1. Aims 2
2. Legislation and guidance 2
3. Roles and responsibilities 3
4. Identifying individuals at risk 5
5. Assessing risk 7
6. Minimising risk 8
7. Procedures for handling an allergic reaction 9
8. Adrenaline devices (ADs) 9
9. Serious incidents and 'near misses' 11
10. Allergy awareness 13
11. Wellbeing 14
12. Information sharing 15
13. Monitoring arrangements 15
14. Links to other policies 15

1. Aims

This policy aims to:

- Set out our College's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our College supports learners with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the College community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- Children's Wellbeing and Schools Act 2026
- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019
- Anaphylaxis UK Homepage - Anaphylaxis UK
- Benedict's Law

3. Roles and responsibilities

3.1 The Board

The Board is responsible for:

› Ensuring the College has an allergy safety policy which sets out:

- Arrangements to reduce the risk of individuals coming into contact with their known allergens
- Emergency response plans for cases of anaphylaxis

› Reviewing and approving the allergy safety policy at least annually

› Taking steps to ensure the allergy safety policy is:

- Generally known within the College and to parents/carers of learners at College
- At least once a year, brought to the attention of all learners, parents/carers, staff and volunteers
- Published on the College's website and signage up to inform visitors entering college sites

› Ensuring risks relating to learners with allergies are included in the risk register (Appendix 1) and actively managed

The Board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy Safety Lead

The nominated allergy safety lead is Pastoral Manager/SLT supported by Business Manager/SLT.

They're responsible for:

› Implementing this allergy safety policy

› Contributing to the review of the allergy safety policy

› Promoting and maintaining allergy awareness across our college community

› Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)

› Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All learners require support with allergies have an up-do-date individual healthcare plan (IHP)
- All learners with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional

- All staff receive regular allergy awareness training
- All staff are aware of the College's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment (Appendix 3 and 4)
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
    - What lessons there are to learn
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any learner's IHP (for IHP see Appendix 2)

3.3 Head of College

The Head of College is responsible for:

› Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a learner's allergy can be managed through the adjustments made under the Supporting Learners with Medical condition's Policy or whether an IHP is required to specify arrangements that reflect the learner's circumstances

3.4 PA's to SLT

The two PA's to SLT are responsible for:

Checking spare AAIs are present and in date on a monthly basis

› Making sure that replacement AAIs are obtained when expiry dates approach

3.5 Teaching and Support Staff

All teaching and support staff are responsible for:

› Promoting and maintaining allergy awareness among learners

› Maintaining awareness of our allergy safety policy and procedures

› Being able to recognise the signs of severe allergic reactions and anaphylaxis

› Being aware of specific learners with allergies in their care

› Reducing the risk to learners with known allergies coming into contact with known allergens

› Ensuring the wellbeing and inclusion of learners with allergies

› Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead

3.6 Parents/carers

Parents/carers are responsible for:

› Being aware of our college's allergy safety policy

› Providing the college with up-to-date details of their young person's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis

- If required, providing their young person with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the College's guidance on food brought in to be shared
- Updating the College on any changes to their young person's condition

3.7 Learners with allergies

Learners are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AD on their person and only using it for its intended purpose
- Understanding how and when to use their AD

3.8 Learners without allergies

These learners are responsible for:

- Being aware of allergens and the risk they pose to their peers

(Older learners might also be expected to support their peers and staff in the case of an emergency).

4. Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying learners at risk

We will:

- For new starters, send a form to all parent/carers of learners after their place at the college has been confirmed, but before their first college year starts, to confirm any allergy the learner has and whether they carry medication. Where a learner has a new diagnosis and/or has moved to the College mid-term, we will send a form and put arrangements in place from enrolment.

› Send a reminder to parents/carers at the start of each year asking them to update their young person's medical information as necessary

› Learners with an allergy will be asked to wear a purple wrist band to identify them as having an allergy

We ask that parents/carers proactively inform the college in writing if their young person's medical needs change during the college year.

4.2 Identifying staff and visitors at risk

We will

Asking new staff to provide details of their allergies in advance of their start date and ask them to wear a purple wristband

› Asking visitors to provide details of their allergies in advance of their visit or when registering their arrival on site via the Entry sign system. Prompt the visitor to share information and they are required to wear a purple wrist band

4.3 Individual healthcare plans (IHP)

› Learners should have an IHP if they:

› Have an allergy which has a functional impact on them in the College environment

› They are at risk of harm as a result of their allergy; and

› Require arrangements which are additional to or different from those made generally

It is not necessary for a learner to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child/young person shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the learner. College will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for learners who are new to our College.

Not all young people with an allergy will require an IHP. Some allergies will have little or no impact on the learner while they are at College, or pose no risk to the learner. Some allergies will not require arrangements which are additional to or different from those made generally.

The Head of College is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a learner's allergy can be managed through the adjustments made under the Supporting Learners with Medical Conditions Policy or whether an IHP is required to specify arrangements that reflect the learners circumstances.

College will consider the following principles:

- If the arrangements or support which a learner requires would be available to any learner as part of normal policies, an IHP may not be required
- If the learner only needs non-prescription medication and the College's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the learner's needs have changed. Where a learner moves on to a new college, their IHP will be shared as part of the transition.

Appendix 2 contains IHP template.

4.4 Allergy and asthma action plans

All learners who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All learners who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the learner's IHP. Whenever the allergy action plan is updated, the learners IHP should be reviewed to incorporate it.

5. Assessing risk

College will conduct a risk assessment for any learner at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and College trips
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any learner at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

6. Minimising risk

6.1 Hygiene procedures

- Learners are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed

6.2 Catering

College is committed to providing safe food options to meet the dietary needs of learners with allergies where food is provided.

- Staff receive appropriate training and are able to identify learners with allergies
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Where food is provided by the college, staff will understand how to read labels for food allergens
- Staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

6.3 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

6.4 Animals

- All learners will always wash hands after interacting with animals to avoid putting learners with allergies at risk through later contact
- Learners with animal allergies will not interact with animals

6.5 Visits and trips

- No learners with allergies will be excluded from taking part
- College will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of learners' allergies and to have received appropriate training
- College will conduct a risk assessment for any learner at risk of anaphylaxis taking part in a College trip
- Learners at risk of anaphylaxis should have their own ADs with them
- Staff trained to administer adrenaline in an emergency will be present on the College trip
- Appropriate measures will be taken in line with the Colleges AD protocols for off-site events and College trips (see section 8.5)

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the learner has an allergy action plan, this must be followed
- A spare College AD device will only be used if:
    - The learner does not have a prescribed AD
    - The learner's prescribed AD are not available or misfire

8. Adrenaline devices (ADs)

8.1 Prescribed ADs

Learners who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the College and on College trips. It is recommended that two devices are carried at all times. Learners with prescribed ADs should take them home with them at the end of each school day, and parents are responsible for ensuring that they are in date.

If a learner cannot keep their ADs with them in the classroom (due to other considerations), then the devices will be stored:

They should be:

Two stored in each Unit of Ebor site and accessible at all times

Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

additional arrangements required to make sure that learners with prescribed ADs have rapid access to their devices at all times. This includes while travelling to and from college, in the lunch area or when on external visits/trips.

A copy of the learner's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

Learners and parents/carers will take individually prescribed ADs home at the end of the day for the journey home and to return into college with them each day and these will be checked and recorded on the register and check that they remain in date

CPOMS will record when learners have been provided with prescribed adrenaline (and an allergy action plan)

8.2 Spare ADs and inhalers

The allergy safety lead is responsible for sourcing spare ADs [and an emergency asthma reliver inhaler] and ensuring they are stored according to the guidance.

The number of ADs required

Which brand(s) of ADs are purchased (schools are recommended to buy a single brand to avoid confusion)

The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of the AAI guidance)

Spare ADs will be stored:

In an appropriate central location that is and accessible to staff only at all times

No more than 5 minutes away from where they may be needed (larger schools may require ADs to be stored in multiple locations, such as near the dining area and playground)

- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any learners' prescribed ADs and clearly labelled to avoid confusion

PA's to SLT are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliver inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions (for example, in a sharps bin for collection by the local council).

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The college will obtain advance consent from parents/carers or learners for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off College premises

Learners at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on College trips and off-site events

Insert your arrangements for taking spare ADs for emergency use on school trips and off-site events.

The nominated Lead for offsite events will carry the responsibility for adding the AD to the mobile first aid kit.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a learner, 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 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.

9.1 Incident recording

College will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and learners responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

CPOMS will record all incidents and near misses

The college will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

In the case of a pupil aged 16 and over, the college will confirm that the learner agrees that their parents/carers should be informed.

The college will share the report with the learner's parents/carer, the learner or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The college will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at college may be delayed and not recognised until the learner is at home. This means that incident reporting is not limited to staff – the learner, parents/carers or others (such as healthcare professionals) will need to report to College if there has been an incident with a delayed reaction.

Staff will always share the incident report with Pastoral Manager/DSL/SLT. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the learner's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

College will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a learner has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See how to make a RIDDOR report]
- TREC operates as a food business would reporto the local authority: any allergen-related food safety incidents.
- In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

College ensures that all staff are expected to be present during times when learners are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee learner at after-college clubs. It does not include contractors carrying

out work with no learner-facing role such as builders, electricians or other ad hoc maintenance personnel.

College has purchased 'training pens' from EpiPen and Jext so staff can practise safely and be familiar with the differences.

College will conduct allergy safety drills Termly. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that all staff:

- 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/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a learner's wellbeing
- Understand the College's Allergy 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')

10.2 Awareness of Allergy Safety Policy

This Allergy Safety Policy will be published on the College's website and shared with parents/carers at the start of the college year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

Learners will gain knowledge about allergies through Tutorial Focus sessions and notices around college. .

11. Wellbeing

Learners with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their teacher/form tutor/etc.
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis

College will respond to any instance of bullying in line with its behaviour policy.

11.1 Wellbeing support following an incident or 'near miss'

College recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the learner but their family, those involved in responding. and any witnesses. The College will provide support to those involved.

College will support staff involved in any incident or 'near miss'.

See section 9 of the policy for more detail on incidents and 'near misses'.

12. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

13. Monitoring arrangements

The arrangements set out in this policy will be monitored by the allergy safety lead.

The Board will review and approve this policy annually, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

14. TREC other policies/ guidance linked

This policy links to the following policies and procedures:

- Health and Safety policy
- Supporting Learners with Medical Conditions Policy
- Data Protection Policy
- Behaviour Policy
- Managing and Administering Medication Policy
- Safeguarding Policy
- KCSIE 2026

› Admissions Policy

› Health and Wellbeing Policy (Learner and Staff)

› Φιρστ Αιδ Πολιχψ

Appendix 1

TREC | The Ridge Employability College

Learner and Staff Allergy Risk Register – updated _____

RAL/RAST No's	Surname	First Name	Date	Next Review	Uploaded to 365

Appendix 2

TREC | The Ridge Employability College

Individual Healthcare Plan	
Name: **Date of birth:**	**Picture:**
Emergency contact:	
People who need to know:	

Information sharing: **Parental consent:**	
Date issued: **Next review:**	**Last discussed with parents/carers:**
Medical condition:	
My medical condition means that: **Are there any physical restrictions caused by the medical condition(s)?**	
How my condition is managed:	
How my condition affects my education: *(Impact on health/learning/wellbeing)*	
How my conditions affects my life: **Are there any considerations needed at meal or snack times?**	
College's arrangements to support me: Medication: Awareness: Curriculum: Training:	
College environment:	
Visits and trips:	
Emergency response:	
Is the learner aware of their health worsening? Are they able to alert a member of staff?	
Learner comments:	
Signed: **Date:**	**Signed:** **Date:**

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Appendix 3

Allergy Management Risk Assessment for Individual Participants

This form should be completed by the setting in liaison with the parents/guardian and the participant if appropriate. It should be shared with everyone who has contact with the participant. It should be read alongside the participant's Health Care Plan that has been produced the Allergy clinic. A whole organisation approach is recommended in the management of allergy which would involve all staff to have awareness training in addition to key staff having adrenaline autoinjector (AAI) training.

Child/Young person: Click or tap here to enter text.	**Date of Birth:** Click or tap here to enter text.
Setting/School: Click or tap here to enter text.	**Lead member of staff**: Click or tap here to enter text.
Allergies: Click or tap here to enter text. Are reactions: **Ingestion** Click or tap here to enter text. **Direct contact**: Click or tap here to enter text. **Indirect contact**: Click or tap here to enter text.	
G.P: Name: Click or tap here to enter text. Phone number: Click or tap here to enter text.	**Clinic/Hospital:** Name: Click or tap here to enter text. Phone number: Click or tap here to enter text.
Date: Click or tap here to enter text.	**Review date:** Click or tap here to enter text.
Who is responsible for providing support: Click or tap here to enter text.	
People involved in writing this plan: Click or tap here to enter text.	
Signatures: Organisation lead:	

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Date: Click or tap here to enter text.

Young person: Date: Click or tap here to enter text.

I give permission for this risk assessment to be shared with anyone who needs this information to keep my child/young person safe,

I give permission for my child's photograph to be displayed sensitively to keep my child safe,

I give permission for the school's 'spare' AAI to be used on my child in an emergency where anaphylaxis is suspected.

Parents: Date: Click or tap here to enter text.

Complete this risk assessment in discussion with the parent/guardian and participant if appropriate. Consider all situations that the participant may be in and agree control measures. Use the risk analysis tool at the end of the document to assess probability and impact producing further control measures if necessary. This is intended to be dynamic document and should be updated annually or after an incident or near miss.
Can the participant recognise a reaction for themselves?
What have been the symptoms of previous reactions?

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What are the hazards for each activity?	What are you already doing to control the risks?	Probability	Impact
Medication:			
Storage: Location of participant's medication If the organisation uses a school, can the school's generic 'spare' AAI be accessed? If so, where are they stored?			
Food and drink:			
Is food provided by the organisation or is it to be send in from home? If provided by the organisation what needs to be considered?			

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If sent in by home, are there any additional measures that need to happen?			
Events involving food: Cake sales Parties Drinks			
Celebrations: e.g. Birthdays, Religious festivals			
Activities: **Complete relevant sections**			
Cooking			

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Creative activities: e.g. junk modelling, pasta			
General activities:			
Sports activities: Indoor Outdoor Forest Schools			
Free time activities: Playground Field			
Offsite activities:			
Visitors Day trips			

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Residential visits			
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**

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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

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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

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Appendix 4

Workplace Anaphylaxis Risk Assessment

This form should be completed by a workplace manager and the employee.

Name of employee:	Date of assessment:
Workplace name:	Assessment carried out by:
Date of next risk assessment review (this would usually be annually, unless there is an incident, at which point the risk assessment should be reviewed):	
Allergy Information	
What is the employee allergic to? Allergen exposure risks to be considered: Ingestion ☐ Direct contact ☐ Indirect contact ☐ Summary of current medical evidence seen as part of the risk assessment if required:	
What signs are there that the employee is having an allergic reaction?	

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Is the employee prescribed adrenaline auto-injectors (AAIs)? YES ☐ NO ☐ If yes: - Does the employee have access to **two** of their own prescribed AAIs whilst at work? YES ☐ NO ☐ - Where will the AAIs be stored whilst the employee is at work? (They must be accessible and not locked away) - Does the employee have an Allergy Action Plan to be kept with their AAIs? View a template plan. YES ☐ NO ☐
Please consider the activities below and insert any considerations that need to be put into place e.g., how food allergen cross-contamination can be managed:
Meal times onsite: e.g. Lunch/breaks –
Indoor activities: e.g. office working at a desk (does the employee need their own working space with no 'hot desking'?) –
Outdoor activities: e.g. an outdoor workplace (how can the risk of allergen exposure outdoors be reduced e.g. for an employee with an insect sting allergy?)
Celebration events on site: e.g. birthdays/Christmas –
Offsite activities:

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e.g. eating out/catered events (have catering staff been informed of the employees allergies and is allergen information available?) –
Communal areas: e.g. a shared fridge in a staffroom (does the employee need a separate area to store their food?)
Other workplace activities to consider:

Does the employee give permission for information about their allergies to be shared with the workplace?

YES ☐ NO ☐

Any further comments:

Signatures

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Workplace Manager: Date:

Employee: Date:

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