



Pope Francis
Catholic Multi Academy Trust

Allergies and Anaphylaxis Safety Policy

JOY MERCY SERVICE DIGNITY SOLIDARITY

Approved by:	Trust Board	
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In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The Trust does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

The Trust is committed to maintaining an allergy-aware environment in which the risk of exposure to allergens is minimised through proportionate risk assessment, staff training, partnership with parents and healthcare professionals, reasonable adjustments, and effective emergency response. Whilst it is not possible to guarantee an allergen-free environment, the Trust will take all reasonably practicable steps to reduce foreseeable risks.

The Trust recognises that Benedict's Law places a greater emphasis upon the identification, management and reduction of allergy risk within educational settings. Accordingly, the Trust adopts a whole-school approach to allergy safety through prevention, reasonable adjustments, education, emergency preparedness, governance, regular review and continuous improvement.

The Trust strives to ensure the safety and wellbeing of all members of our school communities. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school.

This policy should be read alongside the Supporting Pupils with Medical Conditions Policy.

Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2002
- Education Act 1996 (as amended)
- Children Act 1989
- National Health Service Act 2006 (as amended)
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Misuse of Drugs Act 1971
- Human Medicines Regulations 2012 (as amended)
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2021) 'School Admissions Code'
- Current DfE statutory guidance 'Supporting pupils at school with medical conditions'
- DfE (2022) 'First aid in schools, early years and further education'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
- Keeping Children Safe in Education (current edition)

- Working Together to Safeguard Children (current edition)
- UK GDPR and Data Protection Act 2018
- Health and Safety (First Aid) Regulations 1981
- Children and Families Act 2014 Section 100
- DfE Allergy Guidance for Schools (2023)
- Children's Wellbeing and Schools Act 2026 and associated allergy safety requirements commonly referred to as "Benedict's Law"
- Allergy UK Good Practice Guidance
- Resuscitation Council UK guidance on Anaphylaxis

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy
- Educational Visits
- Catering Procedures
- Food

Allergy and Anaphylaxis Management

Food allergies

Parents will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service.

When making changes to menus or substituting food products, the school will ensure that pupils' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible.

Where meals include allergens or traces of allergens, staff will use clear and fully visible labels, in line with this policy, to denote the allergens of which consumers should be aware.

The school will make appropriate dietary provision for pupils with medically evidenced dietary requirements.

All food tables will be disinfected before and after being used.

Anti-bacterial wipes and cleaning fluid will be used.

Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.

Any sponges or cloths that are used for cleaning will be colour-coded according to the areas that they are used to clean, e.g. a red sponge for an area which has been used for raw meat, to prevent cross-contamination.

There will be a set of kitchen utensils that are only for use with the food and drink of the pupils at risk. There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products.

Food items containing bread and wheat will be stored separately.

The chosen catering service of the school is responsible for ensuring that the school's policies are always adhered to, including those in relation to the preparation of food, taking into account any allergens.

Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

Kitchen staff should report any near misses immediately. These include:

- Incorrect food served
- Accidental exposure without reaction

Food allergen labelling

The school will work with its catering provider to adhere to allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019, also known as Natasha's Law.

The catering provider will ensure that all food is labelled accurately, that food is never labelled as being 'free from' an ingredient unless staff are certain that there are no traces of that ingredient in the product, and that all labelling is checked before being offered for consumption.

The relevant staff, e.g. kitchen staff, will be trained prior to storing, handling, preparing, cooking and/or serving food to ensure they are aware of their legal obligations. Training will be reviewed on an annual basis, or as soon as there are any revisions to related guidance or legislation.

Food labelling

Food goods classed as 'pre-packed for direct sale' (PPDS) will clearly display the following information on the packaging:

- The name of the food
- The full ingredients list, with ingredients that are allergens emphasised, e.g. in bold, italics, or a different colour

The catering provider will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded, upon delivery, in a food allergen log stored in the kitchen

- Allergen tracking will continue throughout the school's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a weekly basis by the kitchen manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident log and managed by the kitchen manager

Declared allergens

The catering provider will ensure that the following allergens will be declared and listed on all PPDS foods in a clearly legible format:

- Cereals containing gluten and wheat, e.g. spelt, rye and barley
- Crustaceans, e.g. crabs, prawns, lobsters
- Nuts, including almonds, hazelnuts, walnuts, cashews, pecan nuts, brazil nuts and pistachio nuts
- Celery
- Eggs
- Fish
- Peanuts
- Soybeans
- Milk
- Mustard
- Sesame seeds
- Sulphur dioxide and sulphites at concentrations of more than 10mg/kg or 10mg/L in terms of total sulphur dioxide
- Lupin
- Molluscs, e.g. mussels, oysters, squid, snails

The above list will apply to foods prepared on site, e.g. sandwiches, salad pots and cakes, that have been pre-packed prior to them being offered for consumption.

Kitchen staff will be vigilant when ensuring that all PPDS foods have the correct labelling in a clearly legible format, and that this is either printed on the packaging itself or on an attached label. Food goods with incorrect or incomplete labelling will be removed from the product line, disposed of safely and no longer offered for consumption.

Any abnormalities in labelling will be reported to the kitchen manager immediately, who will then contact the relevant supplier where necessary.

The kitchen manager will be responsible for monitoring food ingredients, packaging and labelling on a weekly basis and will contact the supplier immediately in the event of any anomalies.

Changes to ingredients and food packaging

The catering provider will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

Animal allergies

The Animals in School Policy will be adhered to at all times.

Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

In the event of an animal on the school site, staff members will be made aware of any pupils to whom this may pose a risk and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

The school will ensure that any pupil or staff member who comes into contact with the animal washes their hands thoroughly to minimise the risk of the allergen spreading.

Seasonal allergies

The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.

Precautions regarding the prevention of seasonal allergies include ensuring that grass within the school premises is not mown whilst pupils are outside.

Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.

Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

Pupils will be encouraged to wash their hands after playing outside.

Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.

Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the site manager.

The site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.

Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

Adrenaline auto-injectors (AAIs)

Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

Under The Human Medicines (Amendment) Regulations 2017 the school is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.

The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

The school will submit a request, signed by the headteacher, to the pharmaceutical supplier when purchasing AAls, which outlines:

- The name of the school.
- The purposes for which the product is required.
- The total quantity required.

The school will hold either an Epi-Pen or Epi-Pen Jnr dependent upon key stage, in all through settings both may be held.

Spare AAls are stored as part of an emergency anaphylaxis kit, which includes the following:

- One or more AAls
- Instructions on how to use the device(s)
- Instructions on the storage of the device(s)
- Manufacturer's information
- A checklist of injectors, identified by the batch number and expiry date, alongside records of monthly checks
- A note of the arrangements for replacing the injectors
- A list of pupils to whom the AAI can be administered
- An administration record

Pupils who have prescribed AAI devices are able to keep their device in their possession.

Spare AAls are not located more than five minutes away from where they may be required. The emergency anaphylaxis kit(s) can be found at the following locations: School Office

All staff have access to AAI devices, but these are out of reach and inaccessible to pupils – AAI devices are not locked away where access is restricted.

All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.

The following staff member(s) are responsible for maintaining the emergency anaphylaxis kit(s):

- Darren McCann
- Suzannah Dykes

The above staff members conduct a monthly check of the emergency anaphylaxis kit(s) to ensure that:

- Spare AAI devices are present and have not expired.
- Replacement AAls are obtained when expiry dates are approaching.

The following staff member is responsible for overseeing the protocol for the use of spare AAls, its monitoring and implementation, and for maintaining the Register of AAls: Suzannah Dykes

Any used or expired AAls are disposed of correctly after use in accordance with manufacturer's instructions.

Used AAI's may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with this policy.

A sharps bin is utilised where used or expired AAI's are disposed of correctly on the school premises.

Where any AAI's are used, the following information will be recorded on the AAI Record:

- Where and when the reaction took place
- How much medication was given and by whom

Access to spare AAI's

A spare AAI can be administered as a substitute for a pupil's own prescribed AAI, if this cannot be administered correctly, without delay.

Spare AAI's are only accessible to pupils for whom medical authorisation and written parental consent has been provided. This includes pupils at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.

Consent will be obtained as part of the introduction or development of a pupil's IHP.

If consent has been given to administer a spare AAI to a pupil, this will be recorded in their IHP.

The school uses a register of pupils (Register of AAI's) to whom spare AAI's can be administered. This includes the following:

- Name of pupil
- Class
- Known allergens
- Risk factors for anaphylaxis
- Whether medical authorisation has been received
- Whether written parental consent has been received
- Dosage requirements

Parents are required to provide consent on an annual basis to ensure the register remains up to date.

Parents can withdraw their consent at any time. To do so, they must write to the headteacher.

Suzannah Dykes will check the register is up to date on an annual basis.

Suzannah Dykes will also update the register relevant to any changes in consent or a pupil's requirements.

Copies of the register are held centrally and are accessible to all staff members.

Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

Debrief and review of IHP should follow any significant medical emergency.

Mild to moderate allergic reaction

Mild to moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and refer to their IHP to determine appropriate next steps.

The pupil's parents will be contacted immediately if a pupil suffers a mild to moderate allergic reaction, and if any medication has been administered.

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

For mild to moderate allergy symptoms, the pupil's IHP will be followed, and the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.

Should the reaction progress into anaphylaxis, the school will act in accordance with this policy. Where the pupil is required to go to the hospital, an ambulance will be called.

Managing anaphylaxis

In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor and try to ensure the pupil suffering an allergic reaction remains as still as possible; if the pupil is feeling weak, dizzy, appears pale and is sweating their legs will be raised. A designated staff member will be called for help and the emergency services contacted immediately. The designated staff member will administer an AAI to the pupil. Spare AAIs will only be administered if appropriate consent has been received.

Where there is any delay in contacting designated staff members, the nearest staff member will administer the AAI.

If necessary, other staff members may assist the designated staff members with administering AAIs.

A member of staff will stay with the pupil until the emergency services arrive, the pupil will remain lying flat and still. If the pupil's condition deteriorates after initially contacting the emergency services, a second call will be made to ensure an ambulance has been dispatched.

The headteacher will be contacted immediately, as well as a suitably trained individual, such as a first aider.

If the pupil is unresponsive and not breathing normally, CPR should be commenced immediately and emergency services updated.

If there is no improvement after five minutes, a further dose of adrenaline can be administered using another AAI, if available.

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

A designated staff member will contact the pupil's parents as soon as is possible.

Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the pupil has
- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

Any used AAI's will be given to paramedics.

Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.

Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.

A member of staff will accompany the pupil to hospital in the absence of their parents.

If a pupil is taken to hospital by ambulance, two members of staff will accompany them.

A copy of the Register of AAI's will be held in centrally for easy access in the event of an allergic reaction.

Following the occurrence of an allergic reaction, the SLT, in conjunction with the school nursing service, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

Training

Staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed. A training record will be kept by the school.

Designated staff members will be trained in how to administer an AAI, and the sequence of events to follow

when doing so.

Staff competency in administering emergency medication will be assessed and recorded following training and refreshed whenever practice indicates this is required.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher. Training will be kept up to date with refreshers where healthcare professionals advise or where staff competence required updating.

The school will arrange specialist training on a regular basis where a pupil in the school has been diagnosed as being at risk of anaphylaxis.

The relevant staff, e.g. kitchen staff, will be trained on how to identify and monitor the correct food labelling and how to manage the removal and disposal of PPDS foods that do not meet the requirements set out in Natasha's Law.

The relevant members of staff will be trained in how to consistently and accurately trace allergen-containing food routes through the school, from supplier delivery to consumption.

Designated staff members will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAls according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.

All staff members will:

- Be trained to recognise the range of signs and symptoms of an allergic reaction.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild to moderate symptoms.
- Understand that AAls should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a pupil is on the Register of AAls.
- Understand how to access AAls.
- Understand who the designated members of staff are, and how to access their help.
- Understand that it may be necessary for staff members other than designated staff members to administer AAls, e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation.
- Be aware of how to administer an AAI should it be necessary.
- Be aware of the provisions of this policy.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff, volunteers, temporary staff, agency staff, trainee teachers and contractors supervising children during their induction.

All contractors should comply with this policy as a contractual requirement. This includes:

- Breakfast clubs
- External catering
- Lettings
- Holiday clubs
- Sports providers
- Music tuition
- Contractors bringing food onsite

Record keeping

The Local Governing Body will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHPs will be kept in a readily accessible place which all staff are aware of.

Schools will maintain:

- Allergy Register
- AAI Register
- Expiry Register
- Allergy Incident Log
- Staff competency records

Records are retained in accordance with the Trust's Records Retention Schedule and GDPR.

Trust Allergy Assurance

Each school will complete an annual assurance confirming:

- All allergy registers reviewed
- All Individual Healthcare Plans reviewed
- Emergency medication checked
- Staff training completed
- Catering compliance confirmed
- Educational visits reviewed
- Emergency drills completed

Annual Governor Assurance

The school will provide an annual assurance report to the Local Governing Body and Board of Directors including:

- Annual compliance report
- Training compliance
- Medication audit
- Allergy incidents
- Lessons learned
- Actions completed
- Outstanding risks

Liability and indemnity

The board of directors will ensure that the appropriate level of insurance is in place and appropriately reflects the Trust's level of risk.

The details of the schools insurance policy will be displayed within the staff room and the reception area of school, and available from the School Business Manager. Staff acting in accordance with this policy when administering emergency adrenaline are indemnified under Trust arrangements.

Complaints

Parents with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Headteacher in the first instance. If the Headteacher cannot resolve the matter, they will direct parents to the Trust's complaints procedure.

Monitoring arrangements

The headteacher is responsible for reviewing this policy annually.

The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher immediately.

Following each occurrence of an allergic reaction or incident, there should be:

- Incident investigation completed
- Risk assessment review
- IHP review
- Lessons learned
- Governors informed, where appropriate

School should complete an annual audit of

- Individual Healthcare Plans
- Allergy Register
- Medication expiry
- Staff training
- Catering compliance
- Emergency equipment
- Educational visits

Appendix 1 - Individual Healthcare Plan

Name of Pupil	
Date of Birth	
Year / Class	
Emergency contacts	
Staff who need to be aware	

Allergy:

Note what allergy the child or young person has

Note any known allergens

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

How the allergy is managed:

Note any care or action plans or prescribed medication issued by healthcare professionals.

If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.

Note the extent to which the child or young person is able to take responsibility for managing their allergy.

Impact on Education:

Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.

Indicate how the allergy may impact on the child or young person's learning.

Indicate how the allergy may impact on the child or young person's emotional wellbeing.

If relevant, note any interaction between allergy and SEN.

Arrangements for support:

Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.

Outline measures to reduce the risk of contact with known allergens.

Give details of the specific support or adaptations to manage food allergy at meal and snack times.

Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.

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

Appendix 2 – Allergy Risk Assessment

School	
Pupil Name	
Date of Birth	
Year Group	
Confirmed allergens	
Severity of allergy	
History of anaphylaxis (YES / NO)	
Healthcare Professional	
Risk Areas (classroom, dining, visits, practical subjects, clubs)	
Preventative controls	
Emergency medication required	
Location of medication	
Named trained staff	
Additional reasonable adjustments	
Review Date	
Completed by	
Headteacher approval	

Appendix 3 – Allergy Register

Pupil Name	
Year Group	
Photograph (optional)	
Confirmed allergens	
Risk of anaphylaxis	
Prescribed AAI	
Spare AAI consent	
Medication location	
IHP Review date	
Emergency contacts	

Notes:

Appendix 4 – Register of Spare AAls

Device type					
Adult / Junior					
Batch Number					
Expiry Date					
Storage Location					
Monthly Check					
Checked by					
Replacement ordered					
Disposal Date					
Comments					

Appendix 5 – Monthly Emergency Medication Checklist

Emergency medication present	YES / NO
Medication in date	YES / NO
Spare AAls present	YES / NO
Spare inhalers present	YES / NO
Emergency kits complete	YES / NO
Locations labelled	YES / NO
Registers updated	YES / NO
Staff briefed	YES / NO
Completed by	
Signature	
Date	

Appendix 6 – Educational Visit Medical Risk Assessment Checklist

Visit	
Visit date	
Visit leader	
Medical conditions identified	YES / NO
IHPs reviewed	YES / NO
Medication accompanies pupil	YES / NO
Two AAls taken *	YES / NO
Medication in date	YES / NO
Named trained adult	
Emergency contacts	
Venue informed	YES / NO
Catering arrangements	
Emergency procedures briefed	YES / NO
Visit Leader signature	
Headteacher approval	

*** Emergency medication must remain immediately accessible throughout the visit and must never be stored in luggage, coach holds or inaccessible locations.**