Allergy Management Policy

1. Statement of Intent

At North Birmingham Community Gymnastics, we are committed to providing a safe, inclusive, and supportive environment for all children and staff. We recognise that individuals may have allergies or develop allergic conditions, and we take all reasonable steps to minimise risks and respond effectively to allergic reactions.

While we strive to reduce exposure to allergens, we acknowledge that we cannot guarantee a completely allergen-free environment.

2. Responsibilities

The **Club Welfare Officer and Head Coach** are responsible for ensuring this policy is implemented, monitored, and reviewed.

All staff share responsibility for:

- Being aware of children's allergies
- Following individual healthcare plans
- Responding appropriately in an emergency

3. Allergy Information and Record Keeping

- Parents/carers must provide full details of any allergies or intolerances on their child's registration form.
- Parents/carers must inform the club of any new or changing allergies as soon as possible.
- Staff are also required to disclose any personal allergies that may affect their work.
- Allergy information is recorded and maintained on class registers and relevant systems.
- All information is treated as **confidential** and shared only with relevant staff to ensure safety.

4. Individual Healthcare Plans

Where a child has a diagnosed allergy, an **Individual Allergy Management Plan** will be developed in partnership with parents/carers and, where appropriate, healthcare professionals.

These plans will include:

- Known triggers
- Signs and symptoms
- Required medication and dosage
- Emergency procedures
- Emergency contact details
- Parental consent for administering medication

5. Medication Management

- Children and staff who require medication (e.g. adrenaline auto-injectors such as EpiPens) must have **two in-date devices available at all times** during sessions.
- Medication must be stored in a clearly identified, easily accessible location known to all relevant staff and **must never be locked away during sessions**.
- Staff will check that medication is accessible at the start of each session.

6. Staff Training

- A sufficient number of staff are trained in **paediatric first aid**, including the recognition and management of allergic reactions and anaphylaxis.
- Staff are trained in the correct use of adrenaline auto-injectors.
- Training is refreshed regularly to ensure knowledge remains up to date.

7. Risk Management and Prevention

We take proactive steps to minimise risks, including:

- Maintaining a **nut-free environment**. Parents/carers are asked not to send food containing nuts.
- Not allowing food sharing between children.
- Promoting effective **hand hygiene** among staff and children.
- Carrying out regular **risk assessments** to identify and reduce exposure to allergens within the facility.

8. Managing Allergic Reactions

Mild to Moderate Reactions

If a child experiences a mild or moderate allergic reaction (e.g. rash, itching, swelling):

- A trained member of staff will assess the situation and administer appropriate treatment in line with the child's healthcare plan.
- The incident will be recorded.
- Parents/carers will be informed as soon as possible.

Severe Allergic Reactions (Anaphylaxis)

If a child shows signs of a severe allergic reaction:

- A trained member of staff will **immediately administer an adrenaline auto-injector**.
- **Emergency services (999) will be called without delay.**
- The child will not be left unattended.
- If there is no improvement after 5 minutes and symptoms persist, a **second auto-injector** will be administered if available.
- Parents/carers will be contacted immediately.
- A member of staff will accompany the child to hospital if required and remain until a parent/carer arrives.

9. Communication

We work in partnership with parents/carers to ensure effective allergy management. Clear communication is essential to ensure all relevant information is accurate and up to date.

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10. Policy Review

This policy will be reviewed annually or sooner if required.

1.0	03/08/2021	Louise Combellack - Manager	Aug 2022
1.0	10/08/2022	Louise Combellack – Manager	Aug 2023
1.0	01/06/2023	Louise Combellack – Manager	June 2024
1.0	06/06/2024	Louise Combellack – Manager	June 2025
1.0	10/06/2025	Louise Combellack – Manager	June 2026

Version	**Date Approved**	**Summary of Changes**
2.0	10/04/2026	*Clarification as to who is responsible for implementing this policy* *More detail included in step-by-step format regarding emergency allergy procedures* *Information added regarding medication storage and access* *Information added as to what should be included in IHPs* *Risk-assessment information included*

Signed: Louise Combellack Senior Manager Date: 10/04/2026