



ALLERGY SAFETY POLICY

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At a glance

This Allergy Safety Policy informs the process of managing allergy within OCL and reflects our commitment to ensure all children, young people and adults, including those with allergies are fully included and feel safe.

An allergy is the response of the body's immune system to normally harmless substances. Whilst in most people these substances (allergens) pose no problem, in allergic individuals their immune system identifies them as a 'threat' and produces an inappropriate response. This can be relatively minor, such as localised itching, but in more severe cases it causes anaphylaxis, a condition which can lead to upper respiratory obstruction and collapse; this can be fatal.

Common allergens include but are not limited to:

- Food
- Grass and tree pollen
- Dust mites
- Animal Dander
- Insect bites and stings
- Medication (including Ibuprofen, aspirin and certain antibiotics)
- Latex (used to make gloves and condoms)
- Mould

The most common causes of anaphylactic reaction are foods and insect stings.

This policy outlines the steps required to ensure that those with allergy are identified and the risk of contact with their known allergens is minimised. Whilst we will endeavour to control allergens in our academies, we cannot guarantee to be allergen free. Therefore, every adult in the school community is trained in allergy awareness and emergency response to severe reaction (anaphylaxis).

In setting this policy, the Oasis vision is important. Our vision is for community – a place where everyone is included, making a contribution and reaching their God-given potential. To meet that aim we will ensure that no young person is disadvantaged in accessing their education.

Checklist

- ☐ We will raise awareness of this policy to colleagues, visitors, parents and carers, children and young people

- ☐ We will take steps to ensure that there is suitable identification with the academy of those with allergy
- ☐ We will take all necessary steps to reduce/minimise the risk of individuals coming into contact with their known allergen
- ☐ We will train all staff in allergy awareness and emergency response
- ☐ We will manage the risk of food allergy and ensure clear information on allergens in food is provided
- ☐ We will ensure that the wellbeing of children and young people with allergy will be promoted
- ☐ We will recognise and avoid unacceptable practice including placing unnecessary barriers to children and young people from fully participating in academy life

In brief

This section outlines the OCL expectation that should be implemented at each academy. Further guidance and resources to meet the requirements are shared within the health and safety information on Oasis Zone.

Every academy must complete and maintain an Allergy Safety Checklist document. This demonstrates compliance with the requirements below and documents the local arrangements for allergy safety.

Identifying children, staff and visitors with allergy

Each academy must have clear arrangements for:

- Gathering information about known allergies – from the child or young person, their parents or guardians and their previous setting where applicable
- Ensuring accurate information is on Bromcom and that any updates from parents are acted upon
- Identifying children and young people with allergy, their known allergens and whether they carry medication
- Identifying staff and visitors with allergy, their known allergens and whether they carry medication

Academies must have robust arrangements to avoid confusion between students/pupils with the same name. Local arrangements must be fit for purpose within the setting considering the age and any special educational needs.

Individual Healthcare Plans (IHPs)

Where a child or young person with an allergy has needs that are additional or different to those offered generally, an individual healthcare plan (IHP) should be put in place. IHPs are not clinical documents, they are a description of how the academy will respond to the information and advice they have received.

IHPs should:

- Be developed by the academy in collaboration with the child or young person and their parent/carer
- Reference care and action plans issued by healthcare professionals where provided and have these attached to them
- Include information on prescribed medication
- Reflect the advice given by healthcare professionals
- **not** duplicate or summarise clinical instructions in a way that could become a substitute for the care or action plan (potentially introducing error)
- Be reviewed at least annually and more frequently if needs change

In some cases pupils and students will have or be suspected of having an allergy where no clinical advice is available. It is not necessary for a pupil/student to have a formal diagnosis for them to have an IHP. In such cases an academy should:

- put in place arrangements to best support the pupil or student;
- engage closely with the pupil/student and their parents/carers;
- seek advice from local authority school nursing teams.

The process for IHPs is outlined in the OCL Medical Needs and Medicines Policy. A child or young person should not have multiple IHPs covering different conditions, instead they should have one comprehensive plan.

Minimising risk

Each academy must take reasonable steps to minimise the risks of exposure to known allergens. Including:

- adequate sharing of information with all staff
- measures to manage the risk of exposure to meals or snacks provided by the academy;
- measures to minimise the risks of exposure to food allergens through food brought in by others;
- measures to manage risk where pupils or students have a known allergy to airborne or contact allergens
- planning of any lesson or activity to include the risk of exposure to allergens;

- specific risk assessments for individuals when planning trips

Managing Food Allergy

Banning a particular food type does not stop the risk of accidental exposure. Generally, food bans focus on nuts, when in fact allergic reactions can occur with different substances and other foodstuffs.

Academies can reduce the risk of exposure to allergens by implementing simple strategies and encouraging parental participation.

In EYFS settings, at each mealtime and snack time it must be clear who is responsible for checking that the food being provided meets all the requirements for each child.

Please also refer to the OCL Catering Policy.

Academy lunch provision

Where food allergy is identified, parents/carers will be required to cooperate with the academy and adhere to the special diet procedure regarding any special diet requests. Special diet information will be held in a dedicated folder.

Dependent on the complexity of the allergy/allergies parents/carers may be required to meet with the academy to discuss their child's dietary needs.

Academy staff are required to support both the parents and caterers through the process when special diet requests are identified.

Academies and catering providers should:

- provide information about the 14 regulated allergens present in the food they serve;
- comply with the labelling requirements for prepacked for direct sale food (Natasha's Law)
- have at least 2 robust methods of identifying pupils and students with known allergens at mealtimes – suitable to age
- **Not** segregate pupils and students with allergies from their peers
- Ensure that food is prepared in line with age, individual needs, development needs and their allergy plan

Where there is any reliance on the internet or electronic systems, the Allergy Lead must ensure there is a robust local arrangement that is followed if either fail so the child or young person can receive a meal that is safe for them.

Breakfast clubs

The information and controls applied to school lunches must also apply to breakfast or after school clubs.

Staff preparing food for breakfast or afterschool clubs are required to take into account the dietary and allergy needs of all participants.

Self-Catering on educational trips

Staff preparing food on residential visits are required to take into account the dietary and allergy needs of all participants.

Specialist dietary requirements for staff and students on residential trips need to be planned well in advance to ensure they are adequately accommodated during the trips. Parents will need to be involved in all aspects of the planning to ensure that students are not exposed to allergens which put them at risk.

Students should not be excluded from educational visits due to their dietary or medical needs.

Packed lunches

Academies should set clear expectations on ensuring that packed lunches are clearly labelled and stored safely.

Whilst academies may discourage certain allergens (for example nuts) being brought into school, this should not be relied on and it is more important to remain actively aware of the risk and to have robust emergency response plans.

Food used in lessons

Where food is brought into the academy for lessons such as food technology, this should be clearly labelled. When planning any lesson involving food items, teaching staff must consider those with allergies and minimise the risk of exposure whilst ensuring full inclusion.

Managing other allergens – general controls

Insect Bites

Insect bites can also cause severe reactions.

Academies should ensure:

- diligent management of wasp and ant nests on school grounds;
- staff are aware to report significant presence of insects in play areas.

Animals

If pets or animals are visiting, or kept in school this must be subject to risk assessment with careful consideration given to:

- Where the animals are kept;
- Where the feed will be kept/stored;
- Hygiene and cleanliness when handling pets;
- Consideration of individual children's allergies, including completion of risk assessments where indicated.

Air Quality

Academies should minimise air pollutants known to trigger allergies, asthma and other respiratory illnesses. This includes air fresheners, fragrances and aerosols.

Managing prescribed adrenaline devices and/or asthma inhalers

The default position is that every student/pupil who has been prescribed with adrenaline devices must carry them with them at all times. Arrangements must ensure:

- adrenaline devices are carried in pairs as two doses may be required;
- pupils and students are encouraged to keep them in their bags so they have them when travelling to or from school
- if they cannot have them on them (due to age or other considerations), the devices must be in an appropriate central location that is unlocked and accessible;
- the pupil or student is always close enough to their devices that they can be used within five minutes;
- Individuals Allergy Action Plans are held with their medication

The academy must document within each IHP what medication has been prescribed, where this is stored, how and when the pupil or student may access it and when parental consent was obtained to administer this.

Academy 'spare' emergency adrenaline devices (ADs)

Every academy must purchase and hold emergency adrenaline devices appropriate to age. These should **not** be considered a replacement for a student's own AD and are for emergency situations. This does not remove the requirement for students to have access to both of their two prescribed ADs at all times.

Academy 'spare' adrenaline devices can be used on:

- students who have their own prescribed adrenaline device (either an auto-injector or nasal spray) ;
- students with allergies who have been assessed as being at lower risk of anaphylaxis and therefore not prescribed their own device;
- in an emergency situation – for anyone presenting with anaphylaxis (with or without previous consent).

Emergency situation **without** prior consent

The Human Medicines (Amendment) Regulations 2017 permit "spare" adrenaline devices to be used for the purpose of saving a life. This might be, for example, a child presenting for the first time with anaphylaxis due to an unrecognised allergy or with an allergy that had not previously been prescribed an adrenaline device.

The requirements do not expect anyone to check that consent has been given as this would cause delay in emergency treatment. Therefore, a spare AD **can** be used with anyone experiencing anaphylaxis in an emergency, for the purpose of saving life.

However, **emergency asthma inhalers** may **only be used** where a pupil or student has been prescribed a reliever inhaler but where their own prescribed inhaler is not available. Additionally, they may only be used where written consent has been obtained.

If an adrenaline device is administered, academies will be required to relay the following information to the paramedics:

- if the child is known to have an allergy

- what might have caused the reaction
- time the AD was given
- if a second AD was used

Number of ADs required

The Human Medicines (Amendment) regulations 2017 allow schools to purchase adrenaline auto injectors (AAIs) which are type of AD. Currently the regulations do not apply to the newly licensed nasal spray that some individuals are now prescribed.

The DfE statutory guidance outlines the minimum devices required:

Academy type	AAI for children under age 6 years (150 micrograms) Eg. EpiPen Junior, Jext 150	AAI for individuals over 6 years of age (300 micrograms) e.g. EpiPen, Jext 300
State-funded nursery school	Two 'spare' devices	n/a
Primary school	Two 'spare' devices	Two 'spare' devices
Secondary school	n/a	Two 'spare' devices*
Special school	Two 'spare' devices	Two 'spare' devices

* Secondaries and should consider having two pairs of 'spare' devices, so that the 'spare' ADs are not located more than 5 minutes away from where they may be needed.

Purchasing academy 'spare' AAIs

Academies can purchase AAIs from pharmaceutical suppliers (local pharmacy) without a prescription. All requests must come from the Principal in written form using the sample letter. Academies are required to use this letter rather than writing their own.

Current Brands of AAIs prescribed are JEXT® and EPIPEN®. Purchasing the brand that is most commonly prescribed to and used by students in your area is recommended to increase confidence in using and avoid confusion, but not essential.

Storage and access to emergency ADs

Adrenaline devices must be readily available in an emergency and;

- must not be locked away, this includes offices where access might be restricted or controlled;
- must be located no more than five minutes away from where they are needed;
- must be clearly labelled and should not be confused with a student's own medication;
- must be stored in pairs, so that if a second one is necessary it is on hand rather than elsewhere on site;
- should be in an easily recognisable 'Emergency Anaphylaxis kit';
- there must be a schedule of monthly checks to ensure they ready to use.

It is recommended that spare AAIs are kept in the same location as the emergency inhaler kits.

The Academy's spare AAI should only be used as a spare not a replacement for a child's own AAI. Spare AAIs held by the school are in addition to those prescribed for a student.

Spare AAI kits should include

- instructions how to use the devices;
- storage instructions (in line with manufacturers' guidelines);
- manufacturers information;
- a list of AAIs held including information about the make, model, batch number and expiry dates;
- monthly recorded checks of spare AAIs held to ensure they remain in optimum working order;
- arrangements for replacement of the AAIs – by who, when and how;

They may also include:

- a register of students who have been prescribed an AAI (or where there is a medical care plan indicating AAI should be used in an emergency);

However, this is for additional information and must not prevent use on others who are not on this register.

A list of students prescribed a reliever asthma inhaler and for whom written consent has been obtained must be held with the 'Spare' asthma inhaler.

Academies should keep a record of usage of the Spare AAls;

Disposal of spent or out-of-date AAls

Once used, an AAI cannot be reused. They can be given to the paramedics on arrival for them to dispose of, or should be disposed of in a yellow sharps bin.

Out of date medication should be returned to the parents, or must be returned to a pharmacy for safe controlled disposal.

Spare AAls on educational trips

With all emergency medication students, where able, should carry their own medication and spares held by the group leader/first aider. If it is considered appropriate, spare AAls can be taken on school trips. However, the Allergy Lead must ensure that sufficient 'spare' ADs are also left at the academy.

Allergy Safety Drill

Each academy should conduct an allergy safety drill at least once a year to ensure that arrangements are satisfactory and staff are confident in dealing with an emergency.

Wellbeing and inclusion of children and young people with allergy

The local allergy safety arrangements should outline how the wellbeing of those with allergies are promoted. This should include:

- Arrangements for supporting individuals to reassure that steps are being taken to minimise exposure to allergens
- Arrangements for supporting individuals to reassure that robust measures are in place in the event of anaphylaxis
- The strategies in place to recognise when bullying of those with allergies is happening and how that is addressed.

If it is appropriate to involve a child or young person in an allergy safety drill, they should be involved in the planning of the drill to avoid a negative impact on their wellbeing.

Reasonable adjustments must be in place to ensure that where students with allergies receive free meals under the Department for Education's benefits-based and universal infant free school meals policies, they have access to a suitable free school meal.

Serious incidents and near misses

Any serious incident or near miss involving a student, pupil or adult with a medical condition or allergy must be reported on the OCL incident management system as an **accident**.

- Parents or carers (of pupils and students up to age sixteen) should be notified;
- Confirmation of those over sixteen should be sought be informing their parents or carers

All serious incident related to allergy safety should be investigated by the academy Allergy Lead.

As part of the investigation process, a significant incident or near miss should trigger a review of arrangements within the IHP.

Additionally food businesses must report allergen-related food safety incidents to their local authority.

Awareness of this policy

In addition to publishing on academy websites, each academy is required to bring this policy to the attention to parents and carers, students/pupils and all persons who work in the school at least once a year.

Review

Each academy is required to self-check their arrangements using the OCL published checklist:

- At least once a year (this forms part of the academy compliance checks)
- Following an incident or near miss

Academy Insurance Arrangements

All academies are covered by public liability insurance policies, which will indemnify staff against any claims against them arising from managing allergies in accordance with this policy.

Complaints

Should parents/students be dissatisfied with the care and support provided by the academy, they should contact the academy in the first instance.

Responsibilities

This policy applies to all OCL academies and members of the academy community, which include; staff, students, families, volunteers and supply staff. This policy should be used in conjunction with the First Aid and Medical Needs and Medicines policies.

Board Link

The Health & Safety Link Trustee also fulfils this role for Allergy Safety.

National Health and Safety Lead

The National Health and Safety Lead will:

- Review of the Allergy Safety Policy in line with regulatory change and best practice updates
- Ensure that the local requirements of the Allergy Safety Policy are incorporated into the Health and Safety Management System
- Provide guidance and resources to support academies in meeting the requirements of this policy

National Catering Manager

The National Catering Manager manages the catering contracts and OCL delivered catering provision at each academy. They are responsible for ensuring OCL meet due diligence requirements with regard to food hygiene and safety (including allergies) from both contractors and in-house provision. This includes ensuring that caterers consistently provide clear information on allergens in food provided and maintain a programme of food safety audit.

Principals

The Principal must delegate responsibility for managing allergies within the school community, and in doing so should ensure that those with designated roles have sufficient resource and time allocated to be able to manage the care and support to those at risk of allergies/anaphylaxis.

Principals are responsible for ensuring:

- this policy is effectively implemented ensuring all staff are aware of this policy and their role in implementing it;
- a named Allergy Lead (member of ALT) is appointed and the role allocated on Bromcom
- a Deputy Allergy Lead is appointed and the role allocated on Bromcom
- academy staff who provide support to children with allergies are able to access information and other support materials as needed;
- all staff and caterers are aware of the students and staff (where declared) who have food (or other) allergies and are at risk of anaphylaxis;
- all staff are given sufficient time to complete the required training;
- time is allocated for completion of emergency drills;
- the academy has the required emergency ADs
- staff are appropriately insured and are aware they are insured to support students with allergies and use adrenaline devices in emergency situations

Academy Operations Manager

The Academy Operations Manager acts of behalf of the Principal to ensure local implementation of Health & Safety. Related to Allergy Safety, they are accountable (either directly or by delegation to team members) for:

- Acting as the academy's Food Champion, ensuring compliance with national policies & procedures, collaborating with the National Catering Manager and external providers
- Acting as the academy's Health & Safety Champion
- Driving a culture of safety through compliance with the OCL H&S Management system and completion of policy requirements.

Allergy Lead and Deputy Allergy Lead

Every Academy must have a named Allergy Lead who is a member of the Academy Leadership Team.

They will be supported by a named Deputy Allergy Lead who in addition to

deputising in their absence will work with them to ensure that allergies are safely managed within the academy by delegation of specific tasks.

The Allergy Lead is responsible for:

- ensuring that the Allergy Safety Policy is applied locally within their academy;
- completion of the Allergy Safety Checklist;
- ensuring allergy and anaphylaxis training is completed by all staff including temporary and supply staff;
- obtaining allergy information before the start of the September term by sending out the Special Diet Parents Pack provided OCL consisting of:
 - Managing Special Diets letter to parent's template
 - 'Special Diet Information Form'
 - Frequently Asked Questions
- ensuring allergy information is added to Bromcom;
- creating a specific Special Diets folder to collate all the completed 'Special Diet Information Forms' and 'Special Diet Summary Sheet';
- ensuring the folder is kept up to date at all times and made available for reference purposes. This includes destruction of personal information no longer needed, for example when a pupil leaves or confirmation that they no longer have an allergy. This information must be destroyed securely and immediately;
- ensuring all relevant academy staff and catering staff are aware of the location of the file;
- ensuring adequate provision and checking of 'spare' AAIs;
- referring any student with complex special dietary needs to OCL's Occupational Health provider for assistance;
- communicating with all relevant departments to confirm in writing the method of identifying pupils with special diets for every area where food allergies may present an issue;
- that local arrangements promote the wellbeing and inclusion of all children and young people with allergies.

Individual Staff Responsibilities

All OCL colleagues, including temporary and supply staff, should:

- be aware of this policy and their role in implementing it;
- complete OCL Allergy and Anaphylaxis awareness eLearning on an annual basis to include how to recognise the signs and symptoms of an allergic reaction/ anaphylaxis, the treatment of anaphylaxis and awareness of how to use an AAI;
- participate in local AA familiarisation training;
- understand the rapidity with which anaphylaxis can progress to a life-

threatening reaction;

- be aware, at all times, of the students in their care who have known allergies;
- have access to medical information if needed;
- know the location of student and staff (if appropriate) emergency medication;
- be aware of the need to administer adrenaline (using an AAI) without delay as soon as anaphylaxis occurs
- if leading on educational visits, ensure they are competent to act in the case of anaphylaxis ensuring they carry all the relevant emergency supplies, including residential trips and sporting fixtures;
- on educational visits, supervise any food-related activities ensuring that where food is being provided - used or consumed, food allergen information is shared;

Student Responsibilities

We encourage and support OCL students of any age to be familiar with what their allergies are and to provide information about how their allergies affect them.

- Students should be fully involved in discussions about how to reduce the risk of an allergic reaction and be empowered to reduce those risks;
- students trained to administer their own auto injector, will be encouraged to carry it on their person;
- students are responsible when carrying their own medication to ensure it is in date and kept safe and not used for any purpose other than its intended use.

Parental Responsibilities

- On entry to the academy, parents are responsible for notifying the academy via the admissions forms and OCL Special Diet Information form of any history of allergy, previous severe reactions and if any, history of anaphylaxis;
- parents are responsible for ensuring the academy is provided with sufficient and up to date information about their child's medical needs;
- if an Allergy care and action plan has not already been provided by the school nurse, specialist nurse, hospital or previous school, parents are required to participate in the preparation of an Individual Healthcare Plan;
- parents are responsible for ensuring any required medication is always kept on site during school hours, is in date, provided in its original packaging and is replaced as necessary ([Medicines and Healthcare Products Regulatory Agency](#) recommend those prescribed AAIs should have TWO devices available, at all times);

- parents are required to provide consent to the academy to administer medication using the appropriate form in the Medical Needs and Medicines policy;
- parents are responsible for ensuring that they or another nominated adult are contactable at all times;

Healthcare Professionals

Healthcare Professionals, including GPs, paediatricians and specialist nurse practitioners, should provide parents with relevant care and action plans for pupils at risk of anaphylaxis.

When academies are notified that a student is at risk of anaphylaxis and are not in possession of an Allergy care and action plan, the academy should actively seek to locate the appropriate plan. This can be obtained from either the Healthcare Professional, parents, consultant or specialist nurse. Where this is not available an IHP should be written in collaboration with the school nurse (Healthcare Professional), parents, students (where appropriate) and academy. The academy are **not** responsible for preparing the IHP in isolation.

A risk assessment must be completed for any student who is known to be at risk of anaphylaxis and there is no allergy healthcare plan or medication on site. This must be periodically reviewed until the academy is satisfied that the appropriate emergency instructions and medication are in place to support the student.

Training requirements

Allergy awareness training is mandatory for all staff present during times when pupils are scheduled to be on site. This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. This includes also catering staff and others who may oversee children and young people at breakfast or after school clubs.

- OCL Allergy and Anaphylaxis eLearning is mandatory for all OCL staff - this is repeated annually each September
- Allergy Leads must ensure the OCL eLearning or equivalent training is received by other staff and volunteers who work in the academy when children are present

Training in the use of Adrenaline Devices (ADs) should be completed locally. This can be delivered by either:

- Purchasing a 'trainer' version of the ADs they hold and arranging a practical session for staff lead by the Allergy Lead or a First Aider, or;
- Delivered by a Health Practitioner such as a school nurse.

Training should include practical instruction in how to use the different ADs available within the academy. Local records of training must be retained.

Other training requirements identified in individual healthcare plans should be arranged locally. This may include acute asthma or alternative adrenaline devices such as nasal sprays.

Staff preparing food must be trained to at least Level 2 Food Safety and have also completed suitable food allergy training to ensure they understand the risk and are able to provide safe food. This applies to lunches, breakfast clubs and residential.

Statutory requirements

This Policy is based on the requirements of:

- Children's Wellbeing and Schools Act 2026
- Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Health and Safety (First Aid) Regulations 1981
- DfE statutory guidance: Allergy safety in schools July 2026

RACI Matrix

Policy Element			Leadership			Academy			National	
	Board	Trust H&S Steering Group	OCL CEO	OCL COO	Regional Director	Academy Principal	Allergy Lead/Deputy Allergy Lead	Operations Manager	National H&S Lead	National Director of Facilities & Estates
Allergy Safety Policy review	I	C	I	I	C	R	I	I	A	I
Allergy Lead & Deputy Appointment						A&R		I		
Staff Training						A&R	R	I		
Managing and Communicating Allergy Information						A	R	I		
Record Keeping						A	R	I	I	

R:Responsible **A:** Accountable **C:** Consulted **I:** Informed

Document Control

Changes History

Version	Date	Owned and amended by	Recipients	Purpose
1.0	Oct 2022	Lynda Jarvis	Published	New Allergy Awareness Policy
2.0	Sep 2026	Vicki Filby-Filson		Update to reflect new DfE statutory guidance published July 2026

Policy Tier

- ☒ Tier 1
☐ Tier 2
☐ Tier 3
☐ Tier 4

Owner

Vicki Filby-Filson
National Health and Safety Lead

Contact in case of query

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Approvals

This document requires the following approvals.

Name	Position	Date Approved	Version
Directors' group	Approved	14 September 2026	2

Position with the Unions

Does the policy or changes to the policy require consultation with the National Unions under our recognition agreement?

- ☒ Yes
☐ No

If yes, the policy status is:

- ☒ Consulted with Unions and Approved
☐ Fully consulted (completed) but not agreed with Unions but Approved by OCL
☐ Currently under Consultation with Unions
☐ Awaiting Consultation with Unions

Date & Record of Next Union Review
Not applicable

Location

Tick all that apply:

Allergy Safety Policy
 V2.0
 Vicki Filby-Filson/September 2026

- ☒ OCL website
- ☒ Academy website
- ☒ Policy portal
- ☐ Other: state

Customisation

- ☒ OCL policy
- ☐ OCL with an attachment for each academy to complete regarding local arrangements
- ☐ Academy policy
- ☐ Policy is included in principals' annual compliance declaration

Distribution

This document has been distributed to:

Name	Position	Date	Version