THE BUMBLEBEE CHILDREN'S CHARITY
*miracles in movement*

## 1.17 Allergy Risk assessment template

| **Child Name** | **Date:** | **The Allergen:** ***Substance, material, living creature*** | **Who is at risk:** ***People on premises and those most vulnerable*** | **Nature of Reaction:** ***Anaphylactic shock, rash, reddening of skin, swelling, breathing problems etc.*** | **Control measure:** ***How can the child be prevented from contact with the allergen*** | **Review:** ***record, plan, inform, and review*** |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |