Policy 28 – Allergens

Approving Body	S&E Committee
Date Approved	Summer 2026
Version	1
Supersedes Version	
Review Date	Summer 2027

The following assessments have been completed in relation to this policy

Workload impact ✓ Equality impact ✓ Trust virtues ✓

Contents

1. Aims *3*

2. Legislation and guidance *3*

3. Roles and responsibilities *3*

4. Assessing risk *5*

5. Managing risk *6*

6. Procedures for handling an allergic reaction *7*

7. Adrenaline auto-injectors (AAIs) *9*

8. Training *10*

9. Links to other policies *11*

Pupil allergy declaration form ..... *Error! Bookmark not defined.*

1. Aims

This policy aims to:

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

This allergy policy will be reviewed every 2 years or earlier if there are changes to the guidance. The policy is written at Trust level with schools inserting relevant information for their own settings.

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance (links a and b) and on and, the Department of Health and Social Care's guidance (link c) and current legislation (links d and e):

a - supporting pupils with medical conditions at school

b - allergies in schools

c - using emergency adrenaline auto-injectors in schools

d - The Food Information Regulations 2014

e - The Food Information (Amendment) (England) Regulations 2019

f - Allergy safety policy – templateg- Allergy safety in schools statutory guidance

3. Roles and responsibilities

Each school in our Trust must have a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is (must be senior leadership team member):

Charlotte Pell-Reynolds

They are responsible for:

Promoting and maintaining allergy awareness across our school community by:

- Recording and collating allergy and special dietary information for all relevant pupils, staff and visitors (although the allergy lead has ultimate responsibility, the information collection itself may be delegated)
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Implementing the requirements of this policy and sharing this policy with staff, parents/carers
- Educating pupils/students about allergens and allergic reactions

Ensuring that:

- All allergy information is up to date and readily available to staff
- All pupils and staff with allergies have an allergy action plan completed by a medical professional
- All staff will complete allergy and AAI (adrenaline auto-injectors) awareness training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment
- All staff are deemed competent to act in an emergency

3.2 Administrative Responsibilities:

The nominated administrator is:

Charlotte Pell-Reynolds

The administrative officer is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Ordering replacement AAIs
- Any other appropriate tasks delegated by the allergy lead

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures
- Aware of the location of individual pupils' allergy medication
- Aware of the location of the schools anaphylaxis kit
- Being able to recognise the signs of severe allergic reactions and anaphylaxis

- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of pupils with allergies

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis, see Appendix A for a declaration form.
- If required, providing their child 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
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.5 Pupils and Staff with allergies

These pupils and staff are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Older pupils might also be expected to support their peers and staff in the case of an emergency.

4. Assessing risk

The school will conduct a risk assessment, as appropriate, for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods

- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking
- Any visits to the school in which an animal is present (such as a guide dog)

5. Managing risk

5.1 Hygiene procedures

The measures that will be taken to prevent cross contamination are:

- Pupils are reminded to wash their hands with soap and water before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles
- Tables will be cleaned thoroughly after eating

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils and staff/visitors with allergies, across the Trust we work with two outside catering companies, they ensure that:

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view with ingredients clearly labelled
- Where changes are made to school menus, they meet any special dietary needs of pupils
- 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)
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils, parents and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

5.4 Insect bites/stings

When outdoors:

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

5.5 Animals

- All pupils will be reminded to wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Any pupils with animal allergies will be reminded not interact with animals

5.6 Support for mental health

Pupils with allergies can access additional support, if required, through:

- Pastoral care which should promote support for the well-being of a child with an allergy
- Regular check-ins with their [class teacher/form tutor/etc.]

Schools must be clear how they will address and avoid any bullying of children with allergies

5.7 Events and school trips

- For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training in advance of the trip taking place
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5)
- A separate risk assessment will be undertaken for pupils at risk of anaphylaxis

6. Procedures for handling an allergic reaction

6.1 Register of pupils and staff with AAIs

The school maintains a register of pupils and staff who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis. Details for the register are captured from the completion of the form attached at Appendix A.

The register can be quickly accessed by any member of staff as part of initiating an emergency response. The register is kept:

School Office

- The register includes:
    - Known allergens and risk factors for anaphylaxis
    - Whether a pupil/staff member has been prescribed AAI(s) (and if so, what type and dose)
    - Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil
    - A photograph of each pupil to allow a visual check to be made (this will require parental consent)

6.2 Allergic reaction procedures

- As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately
- A record of the training received is held
- Staff are trained in the administration of AAIs to minimise delays in pupil's receiving adrenaline in an emergency
- If a pupil/staff member has an allergic reaction, the staff member will initiate the school's emergency response plan, following their allergy action plan
- If an AAI needs to be administered, a member of staff will use the pupil's/staff members own AAI, or if it is not available, they will use one from the school's anaphylaxis kit.
- If the pupil/staff member/visitor has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures
- Emergency services will be contacted and informed that an anaphylactic reaction is occurring
- Parents/carers will be contacted for pupils
- The school will follow their own emergency procedures
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed

A school AAI device will be used instead of the pupil's own AAI device if:

- Medical authorisation and written parental consent have been provided, or
- The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAIs

The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance.

Schools are encouraged to buy a single brand of AAIs to avoid confusion.

Schools should be mindful of the dosage required as per the 'guidance on the use of adrenaline auto-injectors in schools' see link c in section 2 of this policy:

For children aged under 6 years (children weighing up to 15kg)	a dose of 150 microgram (0.15 milligram) of adrenaline is used from one of the following: • using an Epipen Junior (0.15mg) • Emerade 150 or • Jext 150 microgram	150 micrograms
For children aged 6-12 years (children weighing 15-24 kg)	a dose of 300 microgram (0.3 milligram) of adrenaline is used from one of the following: • using an Epipen (0.3mg) • Emerade 300 or • Jext 300 microgram	300 micrograms
For children aged 12 years plus (child weighing 25 kg or more)	a dose of 300 microgram (0.3 milligram) of adrenaline is used from one of the following: • using an Epipen (0.3mg) • Emerade 300 or • Jext 300 microgram	300 micrograms – 500 micrograms can also be used.

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

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

- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children
- Not locked away, but accessible and available for use at all times
- Not located more than 5 minutes away from where they may be
- Spare AAIs are kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Disposal

AAIs can only be used once. Once a AAI 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).

7.4 Use of AAIs off school premises

- Pupils at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on school trips and off-site events
- Spare AI's will not be taken on trips unless the whole school is attending

7.5 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils to whom the AAI can be administered
- A record of when AAIs have been administered

8. Training

Online training will be carried out annually, and will include:

- How to reduce and prevent the risk of allergic reactions
- How to spot the range of symptoms of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies

- Know how to check whether an individual is on the record of those known to have allergies or asthma
- Know how to report an allergic reaction (whether an incident or a near miss)
- Training for new staff as part of their induction programme

Records of the training will be retained.

9. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy

Appendix A – Pupil Allergy Declaration Form

Name of pupil			
Date of birth		**Year group**	
Name of GP			
Address of GP			

Nature of allergy	
Severity of allergy	
Symptoms of an adverse reaction	
Details of required medical attention	

Instructions for administering medication	
Control measures to avoid an adverse reaction	

Parental Agreement to Administer Spare Adrenalin Auto Injectors (AAIs)

I understand that the school may purchase spare AAIs to be used in the event of an emergency allergic reaction. I also understand that, in the event of my child's prescribed AAI not working, it may be necessary for the school to administer a spare AAI, but this is only possible with medical authorisation and my written consent.

Considering the above, I provide consent for the school to administer a spare AAI to my child.

Yes	☐	**No**	☐

Name of Child	
Name of parent/carer	
Relationship to child	
Contact details of parent/carer	
Parent/Carer signature	
Date of Signature	