Pupil allergy policy

Altrincham CE Primary School

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Aided Primary School

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1. Aims

This policy aims to:

- Set out our school's approach to allergy management, including reducing the risk of exposure and 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 policy will be reviewed at least annually and more frequently following any serious incident or "near miss" to address lessons learnt.

This policy will be published on the school website and a hard copy made available to parents and staff upon request.

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on allergies in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019
- **Section 34 of the Children's Wellbeing and Schools Act 2026**
- Allergy safety in schools Statutory guidance for governing bodies of maintained schools and proprietors of academies in England July 2026

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is the Head of School.

They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils with allergies have an allergy action plan completed by a medical professional
    - All staff receive an appropriate level of allergy 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
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Regularly reviewing and updating the allergy policy
- Ensure the policy is integrated into the school's **safeguarding and risk management** arrangements

3.2 School medical officer

The school medical officer (the SENDCo/SBM/Admin at ACE)is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- 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
- 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
- Teach children **how to seek immediate help from a member of staff** if they witness a peer having an allergic reaction
- Introduce children new to school to the catering team to ensure accurate identification

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
- 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 with allergies

These pupils 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
- Be aware **how to seek immediate help from a member of staff** if they witness a peer or a member of staff having an allergic reaction (age appropriate)

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4. Assessing risk

The school will conduct a risk assessment 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

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

5. Managing risk

5.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles and snack boxes

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies using a photograph register with up to date allergy information.
- Reception or children new to school to be introduced to catering staff by class teacher to ensure accurate identification
- School menus are available for parents/carers to view with ingredients clearly labelled

- Where changes are made to school menus, we will make sure these continue to 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 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

If a pupil brings these foods into school, they may be asked to store them in the school office and collect them at the end of the day to minimise the risk.

5.4 Insect bites/stings

When outdoors:

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

5.5 Animals

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will not interact with animals
- Parents informed of any planned interaction with animals to ensure up to date allergy information can be shared prior to the event.

5.6 Support for mental health

Pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy.

Pupils with allergies will have additional support through:

- Identification on the Pastoral care register
- Regular check-ins with their class teacher or the pastoral team

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

- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).
- A **school set of "spare" adrenaline devices** should be taken on school trips as a best practice measure, even if no known allergy sufferers are on the trip

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAIs

- The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis. The register includes:
    - Known allergens and risk factors for anaphylaxis
    - Whether a pupil 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 with parental consent.
- The register is kept in the school kitchen, in the staff room and on SIMs / meditracker and can be checked quickly by any member of staff as part of initiating an emergency response

Allowing all pupils to keep their AAIs with them will reduce delays and allows for confirmation of consent without the need to check the register.

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
- Staff are trained in the administration of AAIs to minimise delays in pupil's receiving adrenaline in an emergency
- If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan
    - If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one

If the pupil 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 by following the NHS guide to what to do in responding to a reaction: https://www.nhs.uk/conditions/anaphylaxis/

- A school AAI device will be used instead of the pupil's own AAI device if:
- Medical authorisation has 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)
- 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
- Staff who act in **good faith** to save a life (such as administering adrenaline) are **protected by law; "mistakes, hesitation, or imperfect technique" in an emergency do not amount to serious or willful misconduct**

7. Adrenaline auto-injectors (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, set out your school's procedures for AAIs, covering these areas:

7.1 Purchasing of spare AAIs

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

'Schools can purchase AAIs from a pharmaceutical supplier, such as a local pharmacy, without a prescription, provided the general advice relating to these transactions are observed: i.e. small quantities on an occasional basis and the school does not intend to profit from it. A supplier will need a request signed by the principal or head teacher (ideally on appropriate headed paper) stating:

• the name of the school for which the product is required;

• the purpose for which that product is required, and

• the total quantity required.

A template letter which can be used for this purpose is provided in Appendix 1, and can also be downloaded at: www.sparepensinschools.uk Please note that pharmacies are not required to provide AAIs free of charge to schools: the school must pay for them as a retail item. A number of different brands of AAI are available in different doses depending on the manufacturer. It is up to the school to decide which brand(s) to purchase. Schools are advised to hold an appropriate quantity of a single brand of AAI device to avoid confusion in administration and training. Where all pupils are prescribed the same device, the school should obtain the same brand for the spare AAI.'

- The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of the guidance)

AAIs are available in different doses, depending on the manufacturer. The Resuscitation Council (UK) recommends that healthcare professionals treat anaphylaxis using the agebased criteria,8 as follows:

• For children age under 6 years: a dose of 150 microgram (0.15 milligram) of adrenaline is used (e.g. using an Epipen Junior (0.15mg), Emerade 150 or Jext 150 microgram device).

• For children age 6-12 years: a dose of 300 microgram (0.3 milligram) of adrenaline is used (e.g. using an Epipen (0.3mg), Emerade 300 or Jext 300 microgram device).

• For teenagers age 12+ years: a dose of 300 or 500 microgram (Emerade 500) can 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 needed Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

(pages 12 and 13 of the guidance.)

7.3 Maintenance (of spare AAIs)

Helen Dunn-Barrett (School Business Manager) and office staff are responsible for checking monthly that:

- The AAIs are present and in date

- Replacement AAIs are obtained when the expiry date is near

7.4 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).

(page 13 of the guidance.)

7.5 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
- In the event of a school trip the trip lead will be responsible for carrying the spare epi pen / AAI and will be aware of how to react in the event of a reaction.
- All staff attending the offsite must be made aware through shared risk assessments of any child with a known allergy and those who need to take additional emergency medication (such as AAIs)
- A **school set of "spare" adrenaline devices** should be taken on school trips as a best practice measure, even if no known allergy sufferers are on the trip

(page 13 of the guidance.)

7.6 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

The school is committed to training all staff (including **supply teachers, visiting staff, agency workers, and regular volunteers)** in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs 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
- **Induction arrangements** to ensure all new staff are allergy-aware from their first day

Training will be carried out at least annually by the allergy lead.

9. Information Sharing and GDPR

- Pupil health information is **"special category data"** under UK GDPR
- This information will only be shared in a **"controlled and respectful way"** to avoid singling out or embarrassing pupils

10. Serious Incidents and "Near Misses"

- **"Near Miss":** An event that did not result in harm but had the **clear potential to do so** (e.g., an allergen-containing meal was served but not eaten).The wellbeing and inclusion implications of allergies
- **Recording Procedure**: All serious incidents and near misses must be recorded in the school's as per Accident Procedures.
- **Learning Lessons:** The Allergy Lead will investigate serious incidents and "near miss" events and report findings to the **Governing Body** to prompt policy reviews and "learn lessons"

11. Links to other policies

This policy links to the following policies and procedures:

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