Staffordshire University Academies Trust

Allergen and Anaphylaxis Policy

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Contents:

Statement of intent

Staffordshire University Academies Trust strives to ensure the safety and wellbeing of all members of the Academy community. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school.
In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the Academy in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The Trust does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

The Trust will not describe an academy as completely “allergen-free” or “nut-free”, as it cannot guarantee the total absence of an allergen. Each academy will instead implement proportionate, evidence-informed controls based on identified risks, pupils’ Individual Healthcare Plans (IHPs), healthcare advice, food safety arrangements and the circumstances of the academy.

Where an academy restricts a particular food or allergen, the reason for the restriction, its scope, communication arrangements and effectiveness will be documented, monitored and reviewed regularly.

This policy will be published on the academy website and made available to pupils, parents, carers, staff, volunteers, contractors and other relevant stakeholders.

At least annually, each academy will take appropriate steps to bring this policy to the attention of pupils, parents and carers, and all persons who work at the academy, whether paid or unpaid.
Information will be communicated in an age-appropriate and accessible manner where necessary.

Staffordshire University Academies Trust establishes these arrangements as the minimum standard for allergy management and anaphylaxis response across all academies within the Trust. Individual academies may implement additional local procedures where necessary; however, these arrangements must not reduce, replace or conflict with the requirements outlined within this policy

1 Legal framework

This policy has due regard to relevant legislation and statutory guidance, including:

- Children and Families Act 2014, particularly section 100, as amended;
- Children's Wellbeing and Schools Act 2026, particularly section 34;
- Children Act 1989;
- Education Act 2002, particularly sections 20 and 175 as applicable;
- Health and Safety at Work etc. Act 1974;
- Equality Act 2010;
- Human Medicines Regulations 2012, including the amendments permitting schools to obtain spare adrenaline auto-injectors;
- Food Information Regulations 2014;
- Food Information (Amendment) (England) Regulations 2019, commonly known as Natasha's Law;
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013;
- UK General Data Protection Regulation and Data Protection Act 2018;
- DfE statutory guidance, *Allergy safety in schools*;
- DfE statutory guidance, *Supporting pupils at school with medical conditions*;
- DfE statutory guidance, *Keeping children safe in education 2026*;
- statutory framework for the Early Years Foundation Stage, where applicable;
- SEND Code of Practice: 0 to 25 years;
- Department of Health and Social Care guidance on the use of adrenaline auto-injectors in schools; and
- current MHRA safety advice concerning adrenaline auto-injectors.

This policy will be implemented in conjunction with the following school policies and documents:

- Health and Safety Policy
- Whole school Food Policy
- Administering Medication Policy
- Supporting Pupils with Medical Conditions Policy
- Animals in School Policy
- Educational Visits and School Trips Policy
- Allergen and Anaphylaxis Risk Assessment
- Child Protection and Safeguarding Policy
- Behaviour Policy
- Anti-Bullying Policy
- Complaints Policy
- First Aid Policy
- Data Protection Policy
- Emergency Planning / Business Continuity Arrangements

2 Definitions

For the purpose of this policy:
Allergy – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.
Allergen – is a normally harmless substance that triggers an allergic reaction for a susceptible person.

Allergic reaction – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:

- Hives
- Generalised flushing of the skin
- Itching and tingling of the skin
- Tingling in and around the mouth
- Burning sensation in the mouth
- Swelling of the throat, mouth or face
- Feeling wheezy
- Abdominal pain
- Rising anxiety
- Nausea and vomiting
- Alterations in heart rate
- Feeling of weakness

Adrenaline device (AD) – a device prescribed for the emergency administration of adrenaline to treat anaphylaxis. This may include an adrenaline auto-injector (AAI) or another licensed adrenaline delivery device prescribed by an appropriate healthcare professional.

References within this policy to a pupil's "prescribed adrenaline device" include any appropriately prescribed adrenaline delivery device.

References to a "spare AAI" mean an adrenaline auto-injector purchased and held by the academy for emergency use in accordance with applicable legislation and statutory guidance.

Anaphylaxis – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:

- Persistent cough
- Throat tightness
- Change in voice, e.g. hoarse or croaky sounds
- Wheeze (whistling noise due to a narrowed airway)
- Difficulty swallowing/speaking
- Swollen tongue
- Difficult or noisy breathing
- Chest tightness
- Feeling dizzy or faint
- Suddenly becoming sleepy, unconscious or collapsing
- For infants and younger pupils, becoming pale or floppy

Scope of allergy

For the purpose of this policy, allergy may include reactions to food, medicines, insect venom, animals, latex or other contact allergens, and airborne allergens such as pollen. The academy will consider each pupil's needs individually and will not limit its allergy safety arrangements to the 14 allergens required to be declared under food information law.

Food intolerance and coeliac disease are not the same as allergy and do not cause anaphylaxis. However, they may require individual dietary, health and inclusion arrangements, which will be managed through the academy's medical conditions, food safety and reasonable-adjustment procedures as appropriate.

Asthma may increase the risks associated with an allergic reaction. Where a pupil has both asthma and an allergy, the pupil's IHP will clearly set out both conditions, the location of prescribed medication and the emergency response arrangements.

3 Roles and responsibilities

The governing board is responsible for:

- Ensuring that policies, plans, and procedures are in place to support pupils with allergies and those who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities and minimise risks.
- Ensuring that the Academy's approach to allergies and anaphylaxis focuses on, and accounts for, the needs of each individual pupil.
- Ensuring that staff are properly trained to provide the support that pupils need, and that they receive allergy and anaphylaxis training at least annually.
- Monitoring the effectiveness of this policy and reviewing it on an annual basis, and after any incident where a pupil experiences an allergic reaction.
- Receiving periodic assurance regarding the effectiveness of allergy management arrangements, including staff training compliance, allergy incidents, near misses and any identified areas for improvement.
- Ensuring that allergy safety arrangements are subject to appropriate governance oversight and challenge, including consideration of serious allergy incidents, significant near misses, emergency-response exercises and any resulting actions or lessons learned.
- Receiving periodic assurance regarding compliance with this policy across Trust academies and monitoring significant allergy incidents, themes, trends, emerging risks and Trust-wide learning arising from complaints, incidents, audits and reviews.

The headteacher is responsible for:

- The development, implementation and monitoring of this policy and related policies.
- Ensuring that parents are informed of their responsibilities in relation to their child's allergies.
- Ensuring that all relevant risk assessments, e.g. to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- Ensuring that allergy and anaphylaxis risks are considered within the academy's wider health and safety risk-management arrangements and that significant identified risks are escalated and monitored through the academy and Trust risk-management arrangements where appropriate.
- Ensuring that all designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding allergic reactions and anaphylaxis, including the necessary precautions and how to respond.
- Ensuring that catering staff are aware of pupils' allergies and act in accordance with the Academy's policies regarding food and hygiene, including this policy.

- Appointing a named member of the academy's senior leadership team as the Allergy Lead, with overall responsibility for allergy safety within the academy, including driving the implementation of this policy and coordinating its review.
- The identity and role of the Allergy Lead will be communicated to staff, pupils and parents and carers.
- The Allergy Lead will have sufficient authority, time and access to relevant information to discharge their responsibilities effectively.
- Ensuring that allergy-related incidents and near misses are investigated and that appropriate lessons learned are implemented.

The Allergy Lead is responsible for:

- Maintaining oversight of allergy management arrangements throughout the academy.
- Maintaining the Allergy Register and ensuring information is reviewed regularly.
- Coordinating the completion and review of Individual Healthcare Plans (IHPs).
- Supporting communication between parents, staff and healthcare professionals.
- Monitoring compliance with this policy.
- Coordinating allergy awareness and anaphylaxis training requirements.
- Ensuring learning from allergy incidents and near misses is implemented.

The academy nurse or other appropriately designated member of staff, where applicable, is responsible for:

- Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff.
- Seeking up-to-date medical information about each pupil via a medical form sent to parents on an annual basis, including information regarding any allergies.
- Contacting parents for required medical documentation regarding a pupil's allergy.

All staff members are responsible for:

- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual healthcare plans (IHPs) as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Following the academy's established arrangements for managing food and allergen risks, including taking appropriate precautions where food is provided, prepared, handled or consumed as part of an academy activity.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
- Being aware of pupils identified as having significant allergies and understanding the control measures required to keep them safe.
- Reporting allergy incidents, medication errors and near misses in accordance with academy procedures.
- Ensuring that relevant information is shared appropriately with temporary staff and volunteers where necessary to safeguard pupils

The kitchen manager is responsible for:

- Monitoring the food allergen log and allergen tracking information for completeness.
- Reporting any non-conforming food labelling to the supplier, where necessary.
- Ensuring the practices of kitchen staff comply with food allergen labelling laws and that training is regularly reviewed and updated.

- Recording incidents of non-conformity, either in allergen labelling, use of ingredients or safe staff practice, in an allergen incident log.
- Acting on entries to the allergen incident log and ensuring the risks of recurrence are minimised.

Kitchen staff are responsible for:

- Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with this policy, and the processes for identifying pupils with specific dietary requirements.
- Ensuring that accurate allergen information is available for food served, including information concerning the 14 allergens required to be declared under food information law, and ensuring that this information is readily available to those who require it.
- Ensuring that the required food labelling is complete, correct, clearly legible, and is either printed on the food packaging or attached via a secure label.
- Reporting to the kitchen manager if food labelling fails to comply with the law.

All parents are responsible for:

- Notifying the academy of their child's allergens, the nature of the allergic reaction, what medication to administer, specified control measures and what can be done to prevent the occurrence of an allergic reaction.
- Keeping the academy up-to-date with their child's medical information.
- Providing written consent for the use of a spare AAI as part of their child's planned allergy management arrangements, where appropriate.
- Providing the academy with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Raising any concerns they may have about the management of their child's allergies with the classroom teacher.

Pupils will be supported, according to their age, understanding and individual needs, to:

- Ensuring that they do not exchange food with other pupils.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown, or have come into contact with an allergen.

Third-party providers, lettings, clubs and visitors

The academy will ensure that relevant allergy safety information and emergency arrangements are communicated to persons providing breakfast clubs, after-school clubs, enrichment activities, catering, transport, lettings or other services under the academy's control.

Contracts and service arrangements will identify the provider's responsibilities for allergen management, staff competence, emergency response, incident reporting and cooperation with the academy's Allergy Lead.

Visitors and volunteers will be given proportionate allergy safety information where their activities could expose pupils to allergens or require them to respond in an emergency.

Where a third party uses academy premises outside the academy day, the letting or hire arrangements will clearly identify responsibility for first aid, emergency medication and the management of allergy-related risks.

Unacceptable practice

Although decisions will be made according to individual circumstances, it is not generally acceptable practice to:

- prevent a pupil from readily accessing their emergency medication;
- prevent a competent pupil from carrying their own prescribed emergency medication where this has been agreed as appropriate;
- ignore the views of the pupil, their parents or carers or relevant healthcare professionals;
- assume that every pupil with the same allergy requires identical support;
- send a pupil experiencing an allergic reaction to another part of the academy unaccompanied;
- delay emergency treatment while attempting to contact a parent, carer or healthcare professional;
- require parents or carers routinely to attend the academy to administer medication or provide allergy-related support which the academy can reasonably provide;
- unnecessarily exclude a pupil from lessons, dining arrangements, extracurricular activities, educational visits or other aspects of academy life because of their allergy;
- penalise a pupil for attendance affected by their medical condition without considering the circumstances; or
- disregard allergy-related risks because a pupil has not previously experienced anaphylaxis.

The overriding consideration will be the safety, dignity, inclusion and individual needs of the pupil.

4 Food allergies

Parents will provide the academy with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.
Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the academy's catering service.
When making changes to menus or substituting food products, the academy will ensure that pupils' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible.
Where meals include allergens or traces of allergens, staff will use clear and fully visible labels, in line with this policy, to denote the allergens of which consumers should be aware.

Each academy will maintain a clear and reliable procedure enabling catering staff and other relevant staff to identify pupils with allergies and specific dietary requirements.

The identification system used by each academy will be documented locally, communicated to relevant staff and reviewed regularly to ensure that it remains effective.

The system will protect pupils' dignity and personal information while ensuring that catering staff have sufficient information to provide food safely.

Tables, work surfaces, utensils and equipment used for food preparation or consumption will be cleaned before and after use using an appropriate cleaning method capable of removing food residues and minimising allergen cross-contact.

Cleaning materials and equipment will be selected and used in accordance with the academy's documented food safety and allergen management procedures. Staff will not assume that a product described as antibacterial will, by itself, remove allergen residue.

Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.

Any sponges or cloths that are used for cleaning will be colour-coded according to the areas that they are used to clean, e.g. a red sponge for an area which has been used for raw meat, to prevent cross-contamination.

Appropriate controls will be implemented to minimise the risk of allergen cross-contact during the storage, preparation, cooking and service of food.

These controls will reflect the academy's documented food safety and allergen management procedures and the arrangements operated by its catering provider.

Relevant staff will be made aware of, and follow, the control measures required for pupils with identified food allergies.

The chosen catering service of the academy is responsible for ensuring that the academy's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.

Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved

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5 Food allergen labelling

The academy will adhere to allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019, also known as Natasha's Law.

The academy will ensure that all food is labelled accurately, that food is never labelled as being 'free from' an ingredient unless staff are certain that there are no traces of that ingredient in the product, and that all labelling is checked before being offered for consumption.

The relevant staff, e.g. kitchen staff, will be trained prior to storing, handling, preparing, cooking and/or serving food to ensure they are aware of their legal obligations. Training will be reviewed on an annual basis, or as soon as there are any revisions to related guidance or legislation.

Food labelling

Food goods classed as 'pre-packed for direct sale' (PPDS) will clearly display the following information on the packaging:

- The name of the food
- The full ingredients list, with ingredients that are allergens emphasised, e.g. in bold, italics, or a different colour

The academy will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded, upon delivery, in a food allergen log stored in the kitchen
- Allergen tracking will continue throughout the academy's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a weekly basis by the kitchen manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident log and managed by the kitchen manager

Declared allergens

The following allergens will be declared and listed on all PPDS foods in a clearly legible format:

- Cereals containing gluten, namely wheat, such as spelt and khorasan wheat, rye, barley and oats.
- Crustaceans, e.g. crabs, prawns, lobsters
- Nuts, including almonds, hazelnuts, walnuts, cashews, pecan nuts, brazil nuts and pistachio nuts
- Celery
- Eggs
- Fish
- Peanuts
- Soybeans
- Milk
- Mustard
- Sesame seeds
- Sulphur dioxide and sulphites at concentrations of more than 10mg/kg or 10mg/L in terms of total sulphur dioxide
- Lupin
- Molluscs, e.g. mussels, oysters, squid, snails

The academy recognises that the 14 allergens required to be declared under food information law are not the only substances capable of causing serious allergic reactions.

Individual pupil allergy information and IHPs will therefore be followed irrespective of whether the relevant allergen is one of the 14 allergens required to be declared under food information law.

The above list will apply to foods prepared on site, e.g. sandwiches, salad pots and cakes, that have been pre-packed prior to them being offered for consumption.

Kitchen staff will be vigilant when ensuring that all PPDS foods have the correct labelling in a clearly legible format, and that this is either printed on the packaging itself or on an attached label. Food goods with incorrect or incomplete labelling will be removed from the product line, disposed of safely and no longer offered for consumption.

Any abnormalities in labelling will be reported to the kitchen manager immediately, who will then contact the relevant supplier where necessary.

The kitchen manager will be responsible for monitoring food ingredients, packaging and labelling on a weekly basis and will contact the supplier immediately in the event of any anomalies.

Changes to ingredients and food packaging

The academy will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

6 Animal allergies

The Animals in School Policy will be adhered to at all times.

Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

In the event of an animal on the academy site, staff members will be made aware of any pupils to whom this may pose a risk and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

The academy will ensure that any pupil or staff member who comes into contact with the animal washes their hands thoroughly to minimise the risk of the allergen spreading.

Where a pupil has been prescribed or authorised antihistamine or other medication for the management of an allergic reaction, this will be managed and administered in accordance with the pupil's IHP and the academy's arrangements for the administration of medication.
Antihistamines must not be used as a substitute for adrenaline or delay the administration of adrenaline where anaphylaxis is suspected.

7 Seasonal allergies

The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.
Precautions regarding the prevention of seasonal allergies include ensuring that grass within the academy premises is not mown whilst pupils are outside.

Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.

Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

Pupils will be encouraged to wash their hands after playing outside.

Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.

Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the academy's nearby proximity, reporting any concerns to the site manager.

The site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the academy premises.

Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

8 Adrenaline auto-injectors (AAIs)

Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

Under The Human Medicines (Amendment) Regulations 2017 the academy is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.

The academy will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

The academy will submit a request, signed by the headteacher, to the pharmaceutical supplier when purchasing AAIs, which outlines:

- The name of the academy.
- The purposes for which the product is required.
- The total quantity required.

The Headteacher and Allergy Lead will determine the appropriate strengths and types of spare AAIs having regard to the ages and needs of pupils attending the academy, current statutory and clinical guidance, manufacturer's instructions and advice obtained from an appropriate healthcare professional or pharmacist.

A pupil's own prescribed adrenaline device will be administered in accordance with the pupil's IHP, Allergy Action Plan and the instructions applicable to that device. Staff must not substitute a different dose solely by reference to the pupil's chronological age.

Spare AAIs will be held in appropriate dosage strengths having regard to the age and needs of pupils within the academy.

Spare AAIs will be stocked and stored in pairs so that a second dose is available where required.

Spare AAIs are stored as part of an emergency anaphylaxis kit, which includes:

- a pair of appropriate spare AAIs;
- instructions on how to use the device or devices;
- instructions on storage;
- manufacturer's information;
- a checklist of devices identified by batch number and expiry date;
- records of routine checks;
- arrangements for replacing used, damaged or expired devices; and
- an administration record.

Pupils who have been prescribed emergency adrenaline should have access to their prescribed devices at all times during the academy day and during academy activities.
Where a pupil is sufficiently competent and it is appropriate for them to do so, they will be encouraged to carry their own prescribed adrenaline devices.

The decision will be made on an individual basis, taking account of the pupil's age, maturity and competence, the views of the pupil and their parents or carers, relevant healthcare advice and the arrangements recorded in the pupil's IHP.

Where prescribed adrenaline devices are held by the academy on behalf of a pupil, they will be stored safely but will not be locked away or otherwise stored in a manner that could delay access in an emergency.
Pupils at risk of anaphylaxis should have access to both of their prescribed adrenaline devices where two devices have been prescribed.

Spare AAIs are not located more than five minutes away from where they may be required.

The location of emergency anaphylaxis kits will be determined by each academy, having regard to the size and layout of the premises and the need for spare AAIs to be accessed without delay.

The locations of all emergency anaphylaxis kits will be recorded within the academy's local allergy safety arrangements and clearly communicated to all staff.

Emergency anaphylaxis kits will be kept in clearly identified, safe and readily accessible locations. They will not be locked away in a manner that could delay access during an emergency.

Each academy will maintain an academy-specific Allergy Safety Arrangements Schedule identifying:

- the named senior leader acting as Allergy Lead;
- the location of prescribed pupil emergency medication;
- the location and dosage of each pair of spare AAIs;
- the role responsible for checking emergency anaphylaxis kits;
- the role responsible for maintaining the Allergy Register;
- the academy's procedure for identifying pupils with dietary requirements; and
- any academy-specific allergy risk-control arrangements.

The schedule will be reviewed at least annually and whenever there is a relevant staffing, premises or operational change.

All staff will know how to obtain emergency anaphylaxis kits without delay. Spare AAIs will be stored securely and out of the unsupervised reach of younger pupils, but will not be locked away or stored in a manner that could delay access. This does not prevent a pupil who has been assessed as competent from carrying their own prescribed adrenaline devices where this is documented in their IHP.

All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

All AAI devices will be stored in accordance with the manufacturer's instructions, protected from direct sunlight and extremes of temperature.

The Allergy Lead, or a suitably trained member of staff formally delegated by the Headteacher, is responsible for ensuring that emergency anaphylaxis kits are maintained and checked.
A documented check of each emergency anaphylaxis kit will be undertaken at least monthly to ensure that:

- the required spare AAI devices are present;
- devices remain within their expiry dates and are in usable condition;
- devices have been stored appropriately;
- the contents of the emergency kit are complete; and
- replacement AAIs are obtained in sufficient time before existing devices expire.

The Allergy Lead will maintain oversight of these checks and ensure that any identified issues are addressed promptly.

The Allergy Lead is responsible for overseeing the academy's arrangements for the use of spare AAIs, monitoring their implementation and ensuring that the Allergy Register is maintained accurately and kept up to date. Any used or expired AAIs are disposed of after use in accordance with manufacturer's instructions. Used AAIs may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with this policy.
A sharps bin is utilised where used or expired AAIs are disposed of on the academy premises.
Where any AAIs are used, the following information will be recorded on the AAI Record:

- Where and when the reaction took place
- How much medication was given and by whom

9 Access to spare AAIs

In accordance with section 100 of the Children and Families Act 2014, as amended by section 34 of the Children's Wellbeing and Schools Act 2026, and having regard to the DfE statutory guidance, Allergy safety in schools, each academy will maintain appropriate spare adrenaline auto-injector provision for emergency use.

The Trust recognises these reforms are commonly referred to as "Benedict's Law". The Trust will keep its arrangements under review and will implement any additional requirements brought into force through regulations made under section 100B of the Children and Families Act 2014.

Spare adrenaline auto-injectors will be available and readily accessible during the academy day and during activities for which the academy is responsible, having regard to the needs of pupils, the size and layout of the premises, educational visits and the academy's emergency arrangements.

Where a pupil has a known allergy, medical authorisation and written parental consent for the use of a spare AAI will normally be obtained as part of the development or review of the pupil's Individual Healthcare Plan (IHP), and this consent will be clearly recorded within the plan.

In an emergency where anaphylaxis is suspected, treatment must not be delayed while staff seek parental consent, confirm whether prior consent has been recorded, or seek telephone advice before administering adrenaline.

Where a pupil's prescribed adrenaline device is not immediately available, cannot be used, has misfired, or an additional dose is required, an appropriate school spare AAI may be administered where this is necessary to preserve life.

The academy recognises that anaphylaxis may occur in a person who has no previously diagnosed allergy or prescribed adrenaline device. Where anaphylaxis is suspected, staff will follow the academy's emergency anaphylaxis procedure and will not delay emergency treatment because the person does not appear on the Allergy Register or has no previous history of allergy. A school-held spare adrenaline device may be used in accordance with the applicable legal framework, current statutory guidance and the emergency arrangements set out within this policy.

Prior parental consent is not required where reasonable action is necessary in a life-threatening emergency. 999 must be called immediately and an ambulance requested, but the administration of adrenaline must not be delayed while emergency services are contacted.

The academy will maintain an Allergy Register which identifies pupils with known allergies and records relevant information required to support their safe care and emergency treatment. Where applicable, the register will identify pupils for whom planned use of a spare AAI has been authorised.
The register will include, as appropriate:

- the pupil's name and class;
- known allergens;
- relevant risk factors for anaphylaxis;
- prescribed adrenaline devices and dosage requirements;
- whether medical authorisation has been received, where applicable;
- whether advance parental consent for planned use of a spare AAI has been received; and
- any other relevant emergency arrangements.

Where advance parental consent forms part of a pupil's planned allergy management arrangements, the academy will seek to confirm or renew that consent at least annually and whenever the pupil's circumstances or treatment arrangements change.

Parents can withdraw their consent at any time. To do so, they must write to the headteacher.
The Allergy Lead will ensure that the Allergy Register is formally reviewed at least annually and updated promptly whenever the academy receives new or revised information concerning a pupil's allergy, medical needs, prescribed medication, emergency arrangements or consent.

Relevant staff will be informed promptly of any changes necessary to safeguard the pupil.

The Allergy Register will be maintained electronically using the academy's designated management or catering information system, such as Bromcom or ParentPay, as appropriate.

Relevant staff will have timely access to the allergy information they require to safeguard pupils, in accordance with their role and the academy's data protection arrangements.

The academy will ensure that arrangements are in place for relevant allergy and emergency information to remain readily accessible in the event of an emergency, temporary loss of access to electronic systems or other disruption.

The Allergy Lead will ensure that allergy information held across relevant systems is reviewed regularly and updated promptly when the academy is notified of a change.

10 School trips

The headteacher will ensure a risk assessment is conducted for each school trip to address pupils with known allergies attending. All activities on the academy trip will be risk assessed to see if they pose a threat to any pupils with allergies and alternative activities will be planned where necessary to ensure the pupils are included.

The academy will speak to the parents of pupils with allergies where appropriate to ensure their co-operation with any special arrangements required for the trip.
A designated adult will be available to support the pupil at all times during a school trip.

Where a pupil requires life-saving medication, appropriate arrangements will be made in advance to ensure that the required medication accompanies the pupil and remains readily accessible throughout the visit.
Where the pupil has been prescribed an adrenaline device, at least one adult who is competent to respond to anaphylaxis and administer the prescribed device will accompany the visit.
A pupil will not be unnecessarily excluded from an educational visit because of their allergy. The academy will work with the pupil, parents or carers and relevant staff to make reasonable and safe arrangements which enable participation wherever possible.

A member of staff will be assigned responsibility for ensuring that the pupil's medication is carried at all times throughout the trip.

Where two adrenaline devices have been prescribed for the pupil, both prescribed devices will accompany the pupil on the visit and remain readily accessible.

The educational visit risk assessment will also consider whether school spare AAIs should accompany the visit.

Where school spare AAIs are taken off site, sufficient appropriate spare provision will remain available for pupils on the academy site.

Allergy management arrangements will form part of the educational visit risk assessment process.
For residential visits, overseas visits and higher-risk activities, specific consideration will be given to medication storage, emergency response arrangements, access to emergency services, allergen exposure risks and communication with parents and carers.

11 Medical attention and required support

Once a pupil's allergies have been identified, appropriate arrangements will be discussed with the pupil's parents or carers, relevant academy staff and, where appropriate, healthcare professionals, and a plan of appropriate action and support will be developed.

All medical attention, including that in relation to administering medication, will be conducted in accordance with the Administering Medication Policy and the Supporting Pupils with Medical Conditions Policy.
Parents will provide the academy nurse with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.

Where a pupil has been prescribed life-saving medication, the academy will work with the pupil and their parents or carers to ensure that appropriate medication is available and readily accessible during the academy day and educational visits.

Any situation in which prescribed life-saving medication is unexpectedly unavailable will be assessed promptly in accordance with the pupil's IHP, relevant risk assessment and the academy's safeguarding and medical arrangements.

Pupils will not be unnecessarily excluded from education or academy activities because of their allergy.

The academy will take a graduated and needs-led approach to supporting pupils with allergies, recognising that allergies may affect attendance, wellbeing, participation, independence, social inclusion and access to learning.

Reasonable adjustments will be considered and implemented where required to enable pupils with allergies to access education, educational visits, extracurricular activities, dining arrangements and wider academy life safely and without substantial disadvantage.

The academy will work in partnership with pupils, parents, carers and relevant professionals to identify barriers to participation and implement proportionate support strategies that promote inclusion, independence, wellbeing and educational achievement.

In developing support arrangements, the academy will have regard to Equality Act duties, SEND principles, safeguarding responsibilities and the individual needs of the pupil.

Any reasonable adjustments will be determined on an individual basis, taking account of the pupil's needs, medical advice, risk assessments, Individual Healthcare Plan (IHP), safeguarding considerations and the practical operation of the academy.

All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.
Any specified support which the pupil may require will be outlined in their IHP.

A pupil whose allergy requires the academy to put individual supportive, preventative or emergency arrangements in place will have those arrangements recorded in an Individual Healthcare Plan (IHP).

An IHP will normally be required where a pupil is at risk of anaphylaxis, has prescribed emergency medication, requires individual arrangements concerning food or activities, has both asthma and a food allergy, or requires support that is additional to or different from the arrangements generally available to pupils.

The absence of current clinical advice will not, by itself, prevent the academy from putting interim arrangements and risk controls in place. The academy will work with the parent or carer and seek appropriate healthcare advice as soon as reasonably practicable.

The IHP will identify, as appropriate, known allergens, signs and symptoms, preventative measures, prescribed medication, the location of emergency medication, emergency procedures, arrangements for meals and activities, and the responsibilities of the pupil, parents or carers and academy staff.

Where a pupil has been provided with an Allergy Action Plan or equivalent emergency treatment plan by an appropriate healthcare professional, this will be incorporated into, or held alongside, the pupil's IHP and followed as part of the pupil's emergency arrangements.

IHPs will be reviewed at least annually and sooner where there is a change in diagnosis, medication, treatment or circumstances, or following a significant allergy-related incident or near miss.

When a pupil with an allergy joins the academy, moves between classes or phases, transfers between Trust academies, or leaves for another education setting, the academy will plan the safe and timely transfer of relevant allergy information.

Subject to applicable data protection requirements, the academy will share the pupil's current IHP, Allergy Action Plan, relevant risk assessments and medication information with staff or settings that require the information to support the pupil safely.

The academy will seek to complete transition arrangements before the pupil begins in the new class, phase or setting wherever reasonably practicable.

All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's IHP.

The academy will maintain an Allergy Register identifying pupils with diagnosed allergies and those considered at risk of anaphylaxis.

The register will include details of known allergens, prescribed medication, emergency contact details, Individual Healthcare Plan status and any relevant risk management information.

The register will be reviewed at least annually and updated whenever new information becomes available. Information relating to a pupil's allergy will be shared with relevant staff members on a need-to-know basis to support the pupil's health, safety and wellbeing whilst complying with data protection requirements.

The Allergy Lead is responsible for coordinating the development and review of Individual Healthcare Plans (IHPs) for pupils with allergies, working in partnership with the pupil, their parents or carers, relevant academy staff and healthcare professionals as appropriate.
The Allergy Lead will ensure that relevant risk assessments and supporting documentation are completed and that appropriate arrangements are put in place to meet the pupil's individual needs.

The Headteacher retains overall responsibility for ensuring that appropriate IHP arrangements are in place. The Allergy Lead will oversee the day-to-day implementation, monitoring and review of IHPs and will ensure that relevant information is communicated appropriately to staff who need it in order to support the pupil safely.

Staff and visitors with allergies

The academy recognises that staff members and visitors may also have allergies which require reasonable precautions, workplace adjustments or emergency arrangements.

Staff members are encouraged to inform the academy where an allergy may require workplace adjustments, risk-control measures, emergency medication arrangements or emergency response planning.

The academy will undertake an individual workplace risk assessment where appropriate and will consider reasonable adjustments in accordance with its health and safety duties, Equality Act 2010 obligations and relevant employment requirements.

Where emergency medication is required, suitable arrangements will be agreed with the individual concerned regarding storage, access, communication and emergency response procedures.

Personal medical information will be handled confidentially and shared only with persons who reasonably require the information for health, safety, safeguarding or emergency purposes, in accordance with data protection requirements.

Where the academy is informed that a visitor has an allergy, reasonable steps will be taken to communicate relevant allergen information, emergency arrangements and any known risks associated with the visit.

The academy will seek to balance the needs of individuals with allergies against the needs of the wider academy community, implementing proportionate and reasonable control measures based on the identified risk.

12 Pupil wellbeing and allergy-related bullying

The academy recognises that living with an allergy may affect a pupil's physical and emotional wellbeing and may cause anxiety around food, social activities, school trips and other situations in which allergens may be encountered.

Where an allergy is having a significant impact upon a pupil's attendance, participation, emotional wellbeing, independence or ability to engage fully in academy life, the academy will consider what additional support may be required and whether consultation with relevant health, pastoral, safeguarding or SEND professionals is appropriate.

Pupils with allergies will be supported to participate fully in academy life and will not be unnecessarily singled out, isolated or excluded from activities because of their allergy.

Staff will promote an inclusive culture in which allergies are understood and taken seriously.
Allergy-related bullying, harassment or intimidation will not be tolerated. This includes deliberately exposing, or threatening to expose, a pupil to a known allergen; deliberately contaminating food or belongings; teasing a pupil about their allergy or medication; or deliberately encouraging unsafe behaviour.

Any such behaviour will be addressed promptly in accordance with the academy's Behaviour Policy and Anti-Bullying Policy and will be treated with appropriate seriousness having regard to the potential risk to the pupil's health and wellbeing.

Pupils will be encouraged to report concerns about allergy-related bullying or anxiety to a trusted adult. Appropriate pastoral support will be provided where required.

Medical conditions, allergy incidents and safeguarding

An incident involving the management of a pupil's allergy or another medical condition will not, by itself, automatically be treated as a safeguarding matter.

Staff must, however, report the matter promptly to the Designated Safeguarding Lead where an incident, omission, repeated pattern or other information indicates that the pupil may be at increased risk of neglect, abuse or exploitation because of their allergy or medical condition.

This may include circumstances in which essential medical information is repeatedly not provided, prescribed life-saving medication is repeatedly unavailable, a pupil is deliberately exposed or threatened with exposure to an allergen, or the pupil's health needs are otherwise persistently disregarded.

The Designated Safeguarding Lead will consider the information in accordance with the Child Protection and Safeguarding Policy, Keeping Children Safe in Education 2026 and local multi-agency safeguarding procedures.

Allergy-related bullying, deliberate contamination or threatened exposure will also be considered as a potential safeguarding concern where the circumstances indicate a risk of significant harm.

13 Staff training

In accordance with the Children and Families Act 2014, as amended by the Children's Wellbeing and Schools Act 2026, and having regard to the DfE statutory guidance Allergy safety in schools, the academy will ensure that staff receive appropriate allergy awareness and emergency response training. The Trust will implement any further training requirements introduced through regulations made under section 100B of the Children and Families Act 2014.

All staff, including teaching staff, support staff, catering staff, temporary staff, volunteers and contractors, will receive allergy awareness and anaphylaxis training. This training will enable staff to recognise allergic reactions, understand emergency procedures, and act promptly when required.

All staff will receive sufficient training to recognise and respond immediately to suspected anaphylaxis, including how to access and administer an appropriate adrenaline device in an emergency. Staff with additional responsibilities for allergy management will receive enhanced training appropriate to those responsibilities.

Training will be:

- Provided at induction for new staff;
- Refreshed at least annually; and
- Updated promptly where a pupil is newly diagnosed as being at risk of anaphylaxis or where guidance changes.

Relevant staff, including kitchen and catering staff, will be trained to:

- Identify, interpret and monitor food allergen labelling;
- Manage the removal and disposal of pre-packed for direct sale (PPDS) foods that do not meet the requirements of Natasha's Law;
- Accurately trace allergen-containing food routes from supplier delivery through preparation and service to consumption.

Each academy will periodically undertake a simulated allergy/anaphylaxis emergency response exercise to test the effectiveness of its arrangements. This will include, where appropriate, testing staff awareness, access to emergency adrenaline devices, communication arrangements, emergency response times and the practical implementation of this policy.

The outcome of each exercise will be recorded and any learning or required improvement will be incorporated into the academy's allergy safety arrangements, staff training, risk assessments and this policy where appropriate.

Designated staff members will be trained to:

- Recognise the full range of signs and symptoms of severe allergic reactions and anaphylaxis;
- Respond appropriately and without delay when an emergency situation occurs;
- Administer AAIs in accordance with manufacturer's instructions;
- Understand when a second dose of adrenaline may be required;
- Liaise effectively with emergency services;
- Record and report allergic reactions in line with school procedures.

All staff members will:

- Be able to recognise signs and symptoms of allergic reactions, including the potential for rapid escalation to anaphylaxis;
- Understand that anaphylaxis can occur with or without prior mild or moderate symptoms;
- Know that AAIs should be administered without delay when anaphylaxis is suspected;
- Know how to access and check relevant information on the Allergy Register;
- Know how to access both prescribed and spare AAIs quickly in an emergency;
- Understand who the designated staff members are and how to summon assistance;
- Understand that anaphylaxis is a medical emergency and that a trained member of staff should administer an appropriate adrenaline device without delay where anaphylaxis is suspected, in accordance with this policy and the individual's emergency arrangements;
- Be familiar with the procedures set out in this policy.

14 Mild to moderate allergic reaction

Mild to moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and refer to their IHP to determine appropriate next steps.

The pupil's parents will be contacted immediately if a pupil suffers a mild to moderate allergic reaction, and if any medication has been administered.

For mild to moderate allergy symptoms, the pupil's IHP will be followed and the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.

If at any stage anaphylaxis is suspected, staff will immediately follow the emergency procedure set out in the "Managing anaphylaxis" section of this policy.

Adrenaline must not be delayed while staff seek parental consent or telephone advice.

Should the reaction progress to anaphylaxis, the academy will act in accordance with this policy. Where the pupil is required to go to the hospital, an ambulance will be called.

15 Managing anaphylaxis

In the event of suspected anaphylaxis, staff will act immediately.

The pupil must not be left alone.

The pupil should normally be laid flat with their legs raised. Where breathing is significantly difficult, the pupil may be allowed to sit up with their legs outstretched. The pupil must not be allowed to stand or walk, even if they appear to have recovered.

Adrenaline must be administered without delay where anaphylaxis is suspected.

If there is doubt about whether the symptoms amount to anaphylaxis, staff should administer adrenaline without delay where anaphylaxis is reasonably suspected, as the risk of delaying treatment is greater than the risk associated with unnecessary administration.

Where immediately available, the pupil's own prescribed adrenaline device should be used in accordance with their IHP or Allergy Action Plan.

Where the pupil's prescribed adrenaline device is not immediately available, cannot be used, has misfired, or an additional dose is required, an appropriate school spare AAI may be administered.

In a life-threatening emergency, reasonable action necessary to preserve life must not be delayed while staff seek parental consent, establish whether prior consent has been recorded, contact parents or seek telephone advice.

999 must be called immediately and an ambulance requested, stating that anaphylaxis is suspected.

The administration of adrenaline must not be delayed while emergency services are contacted.

If symptoms persist or there is no improvement after five minutes, a second dose of adrenaline will be administered using a second device, where available.

A member of staff will remain with the pupil and monitor them continuously until responsibility is transferred to the ambulance service.

If the pupil stops breathing or shows no signs of life, cardiopulmonary resuscitation will be commenced immediately by a person able to do so and continued until emergency medical assistance takes over.

A designated staff member will contact the pupil's parents as soon as is possible.
Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the pupil has
- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

Any used AAIs will be given to paramedics.
Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.
Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.

Where a parent or carer is not present, an appropriate member of staff will accompany the pupil to hospital where permitted by the ambulance service and reasonably practicable.
The academy will determine whether a second member of staff is required having regard to the pupil's needs, safeguarding considerations, staffing arrangements and any instructions provided by the emergency services.

Following any allergic reaction, anaphylaxis incident, use of an adrenaline auto-injector or significant near miss, the SLT, in conjunction with appropriate staff and healthcare professionals where necessary, will undertake a formal review of the circumstances.

The review will consider the effectiveness of preventative measures, emergency response arrangements, communication processes, staff training requirements and any lessons learned. Any identified actions will be implemented and monitored to completion.

The review will also consider whether:

- the pupil's IHP and risk assessment remain appropriate;
- emergency medication was available and accessible without delay;
- staff followed the expected emergency response;
- preventative controls were effective;
- catering or allergen-management arrangements contributed to the incident;
- communication arrangements were effective; and
- further staff training or changes to academy or Trust-wide arrangements are required.

Learning which may be relevant to other academies within the Trust will be shared appropriately across the Trust.

Following an allergy-related incident, anaphylaxis event, medication error or significant near miss, the Headteacher and Allergy Lead will consider whether any external notification, referral or statutory report is required.

Depending on the circumstances, this may include notification to the Trust, parents or carers, the catering provider, the relevant food business operator, healthcare professionals, local authority food safety or environmental health services, the Food Standards Agency, the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), the local safeguarding partnership, the local authority or any other appropriate regulatory or oversight body.
The requirement for external reporting will be determined according to the circumstances of the incident and the applicable legal reporting thresholds. The completion of an internal incident report does not, by itself, mean that an external notification or statutory report is required.

Where an incident involves a suspected defect, malfunction or failure of an adrenaline auto-injector or other prescribed adrenaline device, the academy will retain the device where safe and practicable to do so and will consider reporting the matter through the MHRA Yellow Card Scheme in accordance with current medicines safety guidance.

Records of any external notifications, referrals or reports will be retained in accordance with the Trust's record management and data protection arrangements.

16 Monitoring and review

The Trust will review this policy annually and following any significant allergy-related incident, change in legislation, publication of updated statutory guidance or identified organisational learning.

The effectiveness of this policy will be monitored through:

- allergy-related incident reporting;
- near miss reporting;
- review of Individual Healthcare Plans;
- staff training compliance;
- compliance monitoring activities;
- feedback from pupils, parents and staff where appropriate; and
- review of academy allergy management arrangements.

All allergy-related incidents, suspected allergic reactions, medication errors and near misses will be recorded, investigated and reviewed.

A near miss is any event that could reasonably have resulted in exposure to an allergen or an allergic reaction but where harm was avoided.

Findings from incident and near miss investigations will be used to review risk assessments, Individual Healthcare Plans, training arrangements, control measures and operational procedures to reduce the likelihood of recurrence

As part of the review of this policy and academy allergy-safety arrangements, the Trust and its academies will seek appropriate feedback from pupils with allergies, parents and carers, relevant staff and, where appropriate, healthcare professionals.

The views and experiences of pupils living with allergies will be taken into account when assessing whether arrangements are safe, inclusive and effective.

Concerns and complaints

Pupils, parents and carers are encouraged to raise allergy safety concerns promptly with the academy so that they can be addressed at the earliest opportunity.

Concerns that cannot be resolved informally will be considered in accordance with the Trust's Complaints Policy. Raising a concern or complaint regarding allergy safety will not adversely affect the support, care or educational provision provided to a pupil.

Where a concern or complaint identifies an immediate health, safety, medical or safeguarding risk, the academy will take appropriate protective action without waiting for the complaints procedure to conclude.

Information arising from concerns and complaints will be considered as part of the academy's monitoring, review and continuous improvement arrangements and may be used to inform risk assessments, Individual Healthcare Plans, training requirements and operational procedures where appropriate.

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	

Spare AAIs

I understand that the academy may hold spare adrenaline auto-injectors (AAIs) for emergency use.

Where my child is known to be at risk of anaphylaxis, consent for the use of a spare AAI will normally be recorded as part of their Individual Healthcare Plan and allergy management arrangements.

I understand that, in a life-threatening emergency where anaphylaxis is suspected, staff will act in accordance with the academy's emergency procedures and reasonable action necessary to preserve life will not be delayed while parental consent is sought or confirmed.

I provide consent for the academy to administer a spare AAI to my child as part of their planned allergy management arrangements.

Yes	☐	**No**	☐

Name of parent	
Relationship to child	
Contact details of parent	
Parental signature	