Reviewed: September 2026
Next Review Date: September 2027

Signed by:
Headteacher
Mrs Claire Jones
Date: September 2026

Co-Chairs of Governors
Mrs Joanna Potter and Mrs Danielle Smith
Date: September 2026

Euxton Primrose Hill Primary School

Allergen and Anaphylaxis Policy

Courage • Ambition • Respect • Excellence

Together we will make a difference

Contents

Statement of intent

Euxton Primrose Hill School is committed to ensuring that pupils with allergy are safe, included and supported to participate as fully as possible in school life. The school recognises that anaphylaxis can be sudden, severe and life-threatening and that a first allergic reaction may occur at school.

This policy sets out the school's arrangements for identifying allergy, minimising avoidable exposure to known allergens, providing appropriate support and Individual Healthcare Plans, ensuring access to prescribed and spare adrenaline, training staff, supporting wellbeing, managing visits and trips, and learning from serious incidents and near misses.

The school will take reasonable and proportionate steps to reduce risk. It does not claim to be an allergen-free environment and will not operate a blanket ‘nut-free’ policy. Allergy safety will be managed through awareness, individual planning, food safety, hygiene, emergency preparedness, inclusion and appropriate risk assessment.

Legal framework

This policy is made with regard to the Department for Education statutory guidance ‘Allergy safety in schools’, published July 2026. This policy is made with regard to the Department for Education statutory guidance ‘Allergy safety in schools’, published on 6 July 2026. Section 34 of the Children’s Wellbeing and Schools Act 2026 amended the Children and Families Act 2014 to introduce statutory duties relating to allergy safety in schools. The governing board must have regard to the statutory guidance.

Relevant wider duties and legislation include the Children and Families Act 2014; Children’s Wellbeing and Schools Act 2026; Equality Act 2010; Health and Safety at Work etc. Act 1974; Education Act 2002; SEND Code of Practice; EYFS statutory framework where applicable; Food Information Regulations 2014 and relevant amendments; Human Medicines Regulations 2012 as amended; and other applicable food safety and medicines requirements.

This policy sits alongside the school's Supporting Pupils with Medical Conditions Policy and does not replace clinical advice, an Allergy Action Plan, Asthma Plan or arrangements requiring healthcare professional involvement.

Roles and responsibilities

Governing Board

- Ensure an allergy safety policy is in place, published and reviewed at least annually.
- Ensure allergy risks are appropriately included within the school's wider risk management arrangements.
- Provide oversight and challenge regarding training, emergency preparedness, incidents, near misses and lessons learned.
- Ensure the policy is readily accessible to parents and staff and communicated in accordance with this policy.

Named Governor for Allergy Safety

- Provides governance oversight and challenge regarding allergy safety.
- Receives relevant information about serious incidents, near misses and safety drills.
- Ensures allergy safety is considered as part of the governing board's wider monitoring of health, safety and pupil wellbeing.
- Supports the annual review of the policy.

Named Senior Leader / Allergy Safety Lead

- Lead implementation, monitoring and review of this policy.
- Coordinate the identification and support of pupils with allergy and ensure arrangements are communicated to relevant staff.
- Oversee allergy awareness training, emergency preparedness, serious incident and near-miss review.
- Work with pupils, parents/carers, staff, catering providers and healthcare professionals as appropriate.

All staff

- Complete required allergy awareness and emergency response training.
- Know how to identify an allergic reaction and anaphylaxis, obtain help and access emergency medication.
- Follow relevant IHPs, Allergy Action Plans and this policy.
- Take reasonable steps to minimise exposure to known allergens and report incidents and near misses.

Catering staff/provider

- Any external catering provider operating on school premises must comply with this policy and the school's allergy arrangements.
- Provide accurate allergen information and comply with applicable food law.
- Maintain safe food preparation, handling, storage and serving arrangements.
- Check ingredient and menu changes before service.
- Work with the school and families to provide safe, inclusive meals.

1. Awareness training

All staff present during times when pupils are scheduled to be on site will receive regular, at least annual, allergy awareness and emergency response training. This includes permanent, temporary, supply, peripatetic, agency and regular volunteer staff, catering staff and staff overseeing breakfast or after-school provision. Contractors with no pupil-facing role are not routinely included.

First aid training is not a substitute for allergy awareness training. Training will include:

- awareness of allergy, the risks it poses and how reactions can occur;
- the relationship between food allergy, asthma, eczema, hay fever and other allergic conditions;
- the difference between food allergy, coeliac disease and food intolerance;
- where to find information about individual allergy triggers;
- recognising allergic reactions and anaphylaxis;
- calling emergency services and informing parents/carers;
- locating and using prescribed and school-held emergency medication, including adrenaline;
- the impact of allergy on wellbeing and the risk of allergy-related bullying;
- how to check the school's record of known allergy and use an Allergy or Asthma Action Plan;
- responsibilities for reducing exposure to known allergens; and
- how to report allergic reactions, anaphylaxis, serious incidents and near misses.

New staff will receive allergy awareness information as part of induction and before taking responsibility for pupils. Arrangements will be in place to ensure supply and cover staff receive appropriate information and training.

2. Wellbeing of children and young people with allergy

The school recognises that allergy can cause anxiety and can make pupils feel different or singled out. Staff will provide reassurance that appropriate measures are in place and will involve pupils and families in decisions about support.

Allergy-related bullying, teasing, threats, deliberate exposure to allergens or exclusion will be treated as a serious behaviour and safeguarding concern and managed under the school's Behaviour and Anti-Bullying Policy.

Pupils with allergy will not be unnecessarily segregated at mealtimes or excluded from activities. Where appropriate, pupils will be supported to understand and increasingly manage their own allergy, taking account of age, competence, risk and safeguarding.

The school will consider the pupil's views and those of parents/carers when developing and reviewing individual arrangements.

3. Minimising risks of exposure to known allergens

The school will take reasonable and proportionate steps to minimise exposure to known allergens affecting pupils, staff or visitors.

- Food supplied by the school or catering provider will be managed in accordance with food law and the school's catering procedures.

- Food brought into school by pupils, parents/carers or staff will be considered within the school's allergy arrangements, including celebrations and treats.
- Food, drinks, lunchboxes and containers intended for a particular pupil should be clearly labelled where appropriate.
- Pupils will be discouraged from trading or sharing food, drinks, utensils or containers.
- Curriculum activities involving food, cooking, science, craft, musical activities, animals or other potential allergens will consider allergy risk at planning stage.
- Where a known allergen would otherwise prevent a pupil participating, a safe alternative will be sought so that the pupil can participate alongside peers wherever reasonably possible.
- Known contact and airborne allergens will be considered in individual risk assessments and reasonable measures put in place.

- Specific allergy risks will be considered when planning external visits and trips.
- The school will use appropriate cleaning and hygiene procedures to reduce cross-contact risk.
- The school will operate an allergy-aware environment rather than claiming to be allergen-free.

Risks relating to allergy and anaphylaxis will be included within the school's wider risk management arrangements and, where appropriate, the school risk register. These risks will be actively monitored by the governing board.

4. Food allergy

The school and its catering provider will manage food allergy risks and provide clear allergen information. The school will work with parents/carers and catering staff to understand individual requirements and to ensure pupils can eat safely alongside their peers.

The 14 regulated allergens will be identified in accordance with applicable food law. For prepacked for direct sale (PPDS) food, the required name of the food, full ingredients list and emphasis of regulated allergens will be provided.

Where menus change or ingredients are substituted, allergen information will be checked before food is served. The school will make reasonable efforts to cater for pupils with food allergy and hypersensitivities.
Pupils with food allergy should not routinely be segregated from peers at mealtimes. Pupils with a known allergy will be provided with a white wristband, which they are expected to wear while on the school premises and during school activities where appropriate. The wristband provides a clear and consistent identifier for staff, including kitchen and catering staff, to support safe identification at mealtimes and help ensure that appropriate allergy arrangements are followed. The use of the wristband will be managed sensitively and with regard to the pupil's dignity, inclusion and confidentiality.

Food used in classrooms, cooking, craft, science, special events and celebrations will be considered as part of allergy risk management. Where food is brought in for celebrations, the school may require prior agreement and sufficient allergen information to ensure safe inclusion.

5. Identification

The school will identify pupils, staff and visitors with known allergy where information is provided and where it is relevant to keeping them safe. Parents/carers will be asked to provide accurate information about diagnosis, triggers, symptoms, prescribed medication and emergency arrangements.

The school will maintain an allergy register of pupils with known allergy and will ensure relevant information is available to staff who need it for safe supervision. Full medical information will not be displayed publicly or shared more widely than necessary.

A pupil will not be assumed not to have an allergy simply because a diagnosis is not yet confirmed. Where allergy is suspected or under investigation, the school will take reasonable interim safety measures and work with parents/carers and healthcare professionals as appropriate.

6. Individual Healthcare Plans (IHPs)

An IHP will be developed for a pupil with allergy where specific support arrangements are required. The IHP will be developed with the pupil, parent/carer and, where appropriate, relevant healthcare professionals.
The IHP will record practical school arrangements and will reference or include the relevant clinical Allergy Action Plan and/or Asthma Plan where applicable.

Depending on the individual pupil, the IHP may cover:

- known allergy/allergens and symptoms;
- emergency response and medication;
- where prescribed medication is stored or carried;
- supervision and self-management arrangements;
- food and mealtime arrangements;
- curriculum and activity arrangements;
- visits, trips and residential activities;
- reasonable adjustments and inclusion;
- communication arrangements;
- actions following an incident or near miss.

IHPs will be reviewed at least annually and sooner following a significant incident, near miss, change in clinical advice or change in the pupil's needs.

7. Prescribed adrenaline

Pupils at risk of anaphylaxis who have been prescribed adrenaline must have ready access to their prescribed adrenaline devices. Medication will be managed in accordance with the pupil's IHP, clinical advice and the school's medicines procedures.

Where appropriate, pupils will be supported to carry their own prescribed medication. Decisions about self-management will be individual and will consider the pupil's competence, understanding, risk, age and safeguarding.

Prescribed adrenaline must not be locked away or stored in a location that prevents rapid access. Staff supervising the pupil must know where it is located and how to obtain it.
Arrangements for the safe carrying of prescribed adrenaline to and from school will be agreed on an individual basis, taking account of the pupil's age, competence, clinical advice and safeguarding.

8. Spare adrenaline devices

The school will stock, store, check and use spare adrenaline devices in accordance with the legal requirements and DfE statutory guidance applying from September 2026. The school will maintain suitable stock, including appropriate doses for the pupils it serves, and ensure devices remain in date and accessible. Spare adrenaline devices will be stored securely but must be rapidly accessible.

The school will hold two pairs of spare AAIs:

- **Entrance Foyer:** one x 150 microgram AAI for children under 6 and one x 300 microgram AAI for children aged 6 and over.
- **Upper Hall:** one x 150 microgram AAI for children under 6 and one x of 300 microgram AAI for children aged 6 and over.

Spare AAIs will be stored in pairs and will be readily accessible and not locked away.

The school will maintain a record of spare devices, expiry dates, checks, use and replacement. Checks will be undertaken at least monthly and following any use.

All staff will be trained to recognise anaphylaxis and to know how to access emergency medication. Emergency treatment must not be delayed while waiting for a particular designated person.

In suspected anaphylaxis, adrenaline should be administered without delay, 999 called, the person kept still and a further dose given after five minutes if there is no improvement, in accordance with the device instructions and emergency guidance.

The school will follow current manufacturer and clinical guidance for storage, administration and disposal of the devices held.

9. Visits and trips

Pupils with allergy will be supported to participate in visits, trips, residentials and extracurricular activities wherever reasonably possible. Allergy must not be used as a reason for unnecessary exclusion or for requiring a parent/carer to accompany their child.

- Allergy needs will be considered in the visit risk assessment.
- Relevant prescribed medication and clinical action plans will accompany the pupil and remain readily accessible.
- Appropriately trained staff will be identified where required.
- Spare adrenaline will be considered and taken where appropriate.
- Food and catering arrangements will be checked in advance.
- Emergency contact arrangements and access to emergency medical care will be confirmed.
- Reasonable adjustments will be made so that pupils can participate alongside peers.

10. Serious incidents and ‘near misses’

The school will identify, record and learn from serious allergic reactions, cases of anaphylaxis and allergy-related near misses. A near miss includes an event where an allergen exposure or emergency situation occurred but serious harm was avoided.

Records will include, where relevant, what happened, where and when, the suspected trigger, the response, medication administered, emergency services involvement, outcome and any contributing factors.
Information provided by parents/carers will be considered as part of the review. Following an incident or near miss, the school will consider whether changes are needed to the pupil's IHP, risk assessment, training, medication arrangements, supervision or this policy.

Relevant serious incidents, near misses and learning from allergy safety drills will be reported to the governing board through the appropriate health and safety, safeguarding or leadership reporting arrangements. Any external reporting requirements will be considered.

The school will conduct allergy safety drills as good practice or active training exercises. These will not involve real medication and will be recorded and used to improve arrangements.

Following a serious incident, the school will also consider the wellbeing of the pupil, their peers and staff involved in or affected by the incident, and provide appropriate support where required.

11. Information sharing

Information about allergy is personal and sensitive. The school will share information where necessary to keep pupils safe and enable them to participate fully in education.

Relevant information will be shared with staff who need it, including temporary, supply, agency, wraparound and trip staff. Information will be shared securely and proportionately.

The school will avoid unnecessary public displays of identifiable medical information. As part of the school's allergy identification arrangements, pupils with a known allergy are provided with a white wristband to support identification by staff, including kitchen and catering staff. The use of the wristband will be proportionate and managed in a way that balances safety, dignity, inclusion and confidentiality.

Parents/carers will be informed about arrangements relevant to their child and will be asked to keep the school informed of changes to allergy, medication or clinical advice.

12. Awareness of the allergy safety policy

This policy will be published on the school website and made readily accessible to parents and staff. A hard copy will be available on request.

The policy will be communicated to staff as part of annual allergy awareness training and to pupils and parents/carers through appropriate school communication.

New pupils and families with known allergy will be introduced to the school's arrangements and support. Where appropriate, they will be given an opportunity to meet relevant staff and become familiar with mealtime and emergency arrangements.

The policy will be reviewed at least annually and following a serious incident or near miss where this indicates that changes may be required. Individuals with allergy will be involved in policy development and review where appropriate.

Appendix A – Pupil Allergy Information and Consent Form

This form should be completed with the pupil's parent/carer and used alongside the pupil's IHP and any clinical Allergy Action Plan.

Pupil name: _____

Date of birth: _____

Class/year group: _____

Parent/carer name(s): _____

Emergency contact number(s): _____

Known allergy/allergies: _____

Known trigger(s): _____

Previous serious reaction/anaphylaxis: _____

Symptoms/signs: _____

Prescribed adrenaline/other emergency medication:

_____

Medication location: _____

Allergy Action Plan attached: _____

IHP required/arrangements: _____

Food/catering arrangements: _____

Arrangements for trips/visits: _____

Other relevant information: _____

Spare adrenaline acknowledgement

I understand that the school stocks spare adrenaline devices for emergency use and that these devices do not replace prescribed medication. I have provided the school with accurate information about my child's allergy and emergency arrangements.

Parent/carer name: _____

Signature: _____

Date: _____

Appendix B – Emergency Anaphylaxis Response

SUSPECT ANAPHYLAXIS – ACT IMMEDIATELY.

- **Give adrenaline immediately** using the person's prescribed AAI if available.
- **Bring the emergency/spare AAI to the person** — do not send the child to the medical room or office.
- **Call 999** and say **"ANAPHYLAXIS."**
- **Lie the person flat with their legs raised**, unless breathing is difficult.
- If breathing is difficult, allow them to **sit up with their legs extended**.
- **Do not allow them to stand or walk.**
- If there is no improvement after **5 minutes**, give a second adrenaline dose if available.
- Stay with them and monitor continuously.
- If they become unresponsive and are not breathing normally, start CPR and use an AED.
- Inform parents/carers as soon as practicable.
- Record the incident and review the arrangements.

Appendix C – Annual Allergy Safety Compliance Check

- Policy reviewed within the last 12 months and published on the website.
- Named senior leader confirmed.
- All staff training completed, including new, supply, agency and wraparound staff.
- Allergy record checked and updated.
- IHPs and clinical action plans reviewed where required.
- Prescribed adrenaline arrangements checked.
- Spare adrenaline devices present, in date, correctly stored and accessible.
- Food allergen information and catering arrangements checked.
- Curriculum, celebration and classroom food arrangements reviewed.
- Trip and extracurricular arrangements checked.
- Serious incidents and near misses reviewed for lessons learned.
- Allergy-related bullying and wellbeing arrangements considered.
- Staff, pupils and parents/carers have been made aware of the policy.
- Any required actions recorded with an owner and completion date.