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Summary of Changes from Previous Version

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1.AIMS

This policy aims to:

- Set out the Place Partnership approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction.
- Make clear how the Academy supports pupils with allergies to ensure their wellbeing and inclusion.
- Promote and maintain allergy awareness across the Place Partnership community.
- Complement the Supporting Students with Medical Conditions and First Aid Policy, which must be read alongside this policy.

2.LEGISLATION AND GUIDANCE

This policy is based on the Department for Education (DfE)'s guidance on [allergies in schools](#) and [Allergy Safety in Schools](#) (2026), the Department of Health and Social Care's guidance on [using emergency adrenaline auto-injectors \(AAIs\) in schools](#), and the following legislation:

- [The Food Information Regulations 2014](#)
- [The Food Information \(Amendment\) \(England\) Regulations 2019](#)

The Academy will publish this Allergy and Anaphylaxis Policy on its website and review it annually, and/or following any serious incident or significant near miss.

3.ROLES AND RESPONSIBILITIES

Place Partnership Trust takes a whole-school approach to allergy and anaphylaxis awareness. Place Partnership Trustees and Governors

Trustees and Governors must ensure:

- The Academy meets its legal duties to support students with medical conditions including those children with allergies as outlined in this policy, which will be reviewed annually.
- The Academy takes reasonable steps to support adults with allergies including staff, volunteers and visitors.
- Hold the Principal to account for implementing allergy procedures effectively, including appropriate risk assessments, emergency medication (including EpiPens/AAIs) annual staff training and the implementation of individual healthcare plans for students with significant allergies.
- There is a process for monitoring and learning from incidents.
- In line with the Supporting Students with Medical Needs and First Aid Policy, there is no unacceptable practice whereby:
 - A student is excluded from learning and/or other activities (including lunch times). because of their medical condition, unless a risk assessment/their IHP directs this.
 - Parents are required to attend school to administer medication.
 - Emergency medication is not accessible.

THE PRINCIPAL

The Principal is responsible for ensuring that the allergy policy is implemented and followed in the Academy, and that students with allergies are kept safe while attending school. They must ensure that systems are in place to:

- Promptly identify students with allergies, and to obtain appropriate medical information from parents and healthcare professionals.
- Implement Healthcare Plans for students who require them and that these are regularly reviewed. Healthcare Plans will reflect the requirements outlined in the DfE template at Appendix Three.
- Confirm that all staff employed by the Trust have undertaken annual training which enables them to recognise allergic reactions and respond to anaphylaxis, including the administration of an EpiPen and asthma reliever inhaler.
- Manage risk both across the school site and during off-site activities, including transport.
- Ensure catering staff and food providers comply with allergen requirements and that information about students (and staff) with allergens is communicated.
- Record accurate records of incidents and emergency responses, and include near misses, showing what learning was taken from these.

NOMINATED PERSONS

The Academy has a senior leader and a nominated person who will be responsible for:

- Liaising with the student, their parents/carers and healthcare professionals where relevant to discuss the allergy management needs.
- Ensuring Individual Health Care Plans are created (with reference to the DfE template at Appendix Three), reviewed and made available to staff in school, and including staff working in catering. An IHP will be required for any child with an anaphylaxis diagnosis and/or whose allergy need requires support, reasonable adjustments, medication or active management in school.
- Checking that sufficient emergency medication (for example, EpiPens/AAls and asthma inhalers) is available and in date, that it is clearly labelled, and that staff know where this is located (see Appendix Five).
- Ensuring that all staff have access to the appropriate pupil medical information and are aware of which pupils in the school have allergies.
- Monitoring allergy incidents and near misses, and ensuring these are reported to the Principal
- Assisting in risk management processes including planning for off-site activities.

SCHOOL STAFF

Managing allergies in the Academy is a whole-school responsibility. All staff are required to:

- Read, understand and put into practice the Allergy and Anaphylaxis Policy.
- Be aware of which students have allergies and understand their healthcare plans.
- Undertake annual training which enables all staff to recognise the signs of severe allergic reactions and anaphylaxis, and to be able to administer an EpiPen/AAl and asthma reliever inhaler(see Appendix Two).
- Be prepared to respond quickly and appropriate in an emergency, including calling emergency services where necessary.
- Consider the use of food or any other potential allergens in lessons and activity planning.

- Report any concerns, incidents and/or near misses to the senior member of staff and/or the Principal.

PARENTS/CARERS

Parents/carers are responsible for:

- Being aware of the Allergy and Anaphylaxis Policy.
- Promptly notifying the Academy of their child's medical needs and dietary requirements, including history of allergies, reactions and anaphylaxis and immediately update the Academy regarding any changes.
- If required, providing 2 in-date EpiPens/AAls and any other medication which is needed.
- Considering the food they provide to their child as packed lunches and snacks, and try to limit the allergens contained in these.

STUDENTS

Secondary age students with a diagnosis of anaphylaxis should be encouraged to carry their own EpiPen/AAl on their person at all times, and understand how and when to use it. They are responsible for being aware of their allergens and the risks posed by them.

4.ASSESSING RISK

Risk assessments will be undertaken wherever there is a student (or staff member) at risk of anaphylaxis. Examples include, but aren't limited to:

- Lessons such as food technology, where food items are routinely used.
- Science experiments involving food.
- Craft activities using food and/or food packaging.
- Off-site activities, extra-curricular activities, school trips and residential visits.
- Any other activities involving animals or food, including baking and animal handling experiences. This would include where a visitor requires a guide or assistance dog.

5.MANAGING RISK

HYGIENE TECHNIQUES

Students are educated in hand washing technique and reminded to wash their hands before and after eating, and when interacting with animals.

Students are advised not to share food and/or drinks, including water bottles.

CATERING

The Academy works closely with catering staff to ensure the allergy and dietary needs of students are understood, and that these students are identifiable either through a biometric identifier or a colour coded wristband which is cross checked with a list provided by the nominated member of staff. The Academy expects that:

- Catering staff receive appropriate training in respect of food allergens.
- Schools' menus are available for parents/carers to view with ingredients clearly labelled, and options are available for children with specific dietary requirements.
- Good allergen information relating to the 'top 14' allergens is displayed on the packing of all food products and labelling following 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 including separate storage and preparation areas.
- Catering staff maintain an allergy aware policy in respect of their foods. This would include, but not be limited to nuts.

FOOD RESTRICTIONS

The Academy encourages parents/carers and staff to consider the contents of packed lunches and to avoid the inclusion of foods which contain allergens.

MENTAL HEALTH AND WELLBEING

It is recognised that children with allergies may experience anxiety and depression and could also be vulnerable to bullying because of their allergy. Any incidents of bullying would be dealt with in line with the Academy behaviour and anti-bullying policies, and students would be supported in line with the Academy's graduated response, having access to a key member of support staff, and referral to mental health services as appropriate.

OFF-SITE AND EXTRA-CURRICULAR ACTIVITIES, SCHOOL TRIPS AND RESIDENTIAL VISITS

No student with an allergy will be prevented from taking part in planned activities whether these are within or outside the school day. The Academy will follow the Learning Outside the Classroom policy to ensure all staff members involved are aware of all medical needs, including any students with an allergy, and have received appropriate training. This will include allergy and anaphylaxis awareness, the use of EpiPens/AAls and the provision for these during school activities.

6.PROCEDURES FOR HANDLING AN ALLERGIC REACTION

REGISTER OF STUDENTS WITH ANAPHYLAXIS

The Academy maintains a list of students who have been identified as having an allergy, including those for whom an EpiPen/AAl has been prescribed. The register will be kept in a known, accessible location for staff and will record:

- Known allergens and risk factors for anaphylaxis.
- Details of any prescribed AAls (type and dose).
- Whether parental consent has been obtained for the use of the Academy's emergency AAl (see Supporting Students with Medical Conditions and First Aid Policy – copy inserted at Appendix One).
- A photograph of each student with an allergy for easy identification; it will be explained to parents/carers that this information will also be shared with catering staff who will keep the list in a secure, locked cabinet.

ALLERGIC REACTION PROCEDURES

All staff will be trained in allergy and anaphylaxis awareness, including the administration of EpiPens/AAls in order to minimise any delay in a student receiving adrenaline in an emergency. Staff will:

- Be aware of students who have a diagnosis of anaphylaxis and EpiPen/AAl.
- Use the student's own EpiPen/AAl wherever possible, but be aware of the location of the Academy's emergency sets in the event they are needed (parental permission would normally be confirmed but in a life preserving, emergency situation then the administration of adrenaline must be prioritised).
- Follow the information set out in the student's health care plan and the Academy's emergency procedures as set out in the Supporting Students with Medical Conditions and First Aid Policy. This includes calling 999 in emergency situations, notifying parents/carers, staying with the child and accompanying them to hospital if necessary, and monitoring any less severe reactions.
- Administration of an EpiPen/AAl must be immediately followed by a 999 emergency call.

7.EPIPENS/ADRENALINE AUTO-INJECTORS (AAIS)

Place Partnership ensures that their primary Academies have a minimum of 2 spare AAls at each strength (150 micrograms and 300 micrograms), and that secondary Academies have a minimum of 4 spare AAls (300 micrograms). The nominated staff member will ensure:

- The spare EpiPens/AAls are stored in line with manufacturer's guidelines, in the original packaging, and protected from direct sunlight and extremes of temperature.
- The expiry date of spare devices are recorded, and replacements ordered at least one month ahead of the renewal date.
- A monthly stockcheck of spare devices is made and recorded.
- The spare devices are kept in a safe but accessible site which is out of sight of children, but not locked away.
- Spare devices are located no more than 5 minutes away from any point of the school site and/or location of students; it may be necessary for devices to be transported to social and lunch areas by responsible adults in primary settings.
- Staff are aware of the location of spare AAls.
- Used AAls are disposed of in line with the manufacturer's instructions and a replacement is procured (whether this is the child's own device or the school's spare device; AAls can only be used once).
- Use of AAls is recorded.

8.SERIOUS INCIDENTS AND NEAR MISSES

A serious medical incident might include a life threatening situation, emergency hospitalisation and incorrect administration of medication. A near miss is also classed as a serious incident where there was potential for harm based on an error, omission or system failure. In the event of a serious incident the Academy will ensure medical support is sought but then inform parents/carers, record the incident and bring the matter to the attention of the Principal and external agencies as appropriate. The Academy will then hold a learning review to identify what measures it can put in place to mitigate future risk including updates to risk assessments and IHPs, staff training and amended procedures. A report should be shared with the link governor, child and parents/carers which catalogues:

- Who was affected.
- What happened, when and where.
- Why the incident occurred (as far as is known).
- How staff and students responded; what was done to support the individual; whether emergency services were called.
- How the incident concluded, including whether there was a need to report a food safety issue or to make a report to the Health and Safety Executive.

APPENDIX ONE: PARENTAL AGREEMENT

Supporting Students with Medical Conditions and First Aid Policy - Appendix 7a: parental agreement for setting to administer medicine:

The Academy/setting will not give your child medicine unless you complete and sign this form, and the Academy or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of Academy/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

If this permission is for a salbutamol inhaler, do you consent for the Academy's emergency inhaler to be administered if needed?

YES/NO

(please delete as appropriate)

If this permission is for an EpiPen, do you consent for the Academy's emergency EpiPen to be administered if needed?

YES/NO

(please delete as appropriate)

Medicine

Name/type of medicine

(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the Academy/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency

NB: Medicines must be in the original container as dispensed by the pharmacy.

Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Academy/setting staff administering medicine in accordance with the Academy/setting policy. I will inform the Academy/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date

APPENDIX TWO: ALLERGY AND ANAPHYLAXIS TRAINING

All staff will be required to complete allergy and anaphylaxis training. The DfE's allergy safety in schools statutory guidance stipulates this must equip staff to:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it.
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist.
- Understand the difference between food allergy, coeliac disease and food intolerance.
- Know where to find information on allergy triggers.
- Can identify the range of symptoms of allergic reactions.
- Understand and can recognise anaphylaxis.
- Know how to respond in an emergency, including:
 - calling emergency services and informing parents.
 - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
 - training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices).
- Understand the impact allergy can have on a child or young person's wellbeing
- Understand the school, college or setting's allergy safety policy.
- Know how to check whether an individual is on the record of those with known allergy and how to use an Allergy or Asthma Action Plan.
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens.
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a "near miss").

APPENDIX THREE: DFE TEMPLATE – INDIVIDUAL HEALTHCARE PLAN FOR ALLERGY

NAME – Individual Healthcare Plan for allergy	
Date of birth:	Current photo
Year / class:	
Emergency contacts:	
Staff who need to be aware:	
Allergy: <i>Note what allergy the child or young person has.</i> <i>Note any known allergens.</i> <i>Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.</i>	
How the allergy is managed: <i>Note any care or action plans or prescribed medication issued by healthcare professionals.</i> <i>If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.</i> <i>Note the extent to which the child or young person is able to take responsibility for managing their allergy.</i>	
Impact on education: <i>Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.</i> <i>Indicate how the allergy may impact on the child or young person's learning.</i> <i>Indicate how the allergy may impact on the child or young person's emotional wellbeing.</i> <i>If relevant, note any interaction between allergy and SEN.</i>	
Arrangements for support: <i>Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.</i> <i>Outline measures to reduce the risk of contact with known allergens.</i>	

Give details of the specific support or adaptations to manage food allergy at meal and snack times.

Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.

Visits and trips:

- *Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.*
- *Note any requirement for a risk assessment and prompts for specific issues which should be considered.*

Emergency response:

Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.

Otherwise summarise the signs or symptoms which would indicate an emergency.

Set out what to do in an emergency, including whom to contact.

If relevant, note where "spare" adrenaline devices are located.

Last discussed with parents:	Date
Issued by:	Date:
Next planned review:	Date:

APPENDIX FOUR: REGULATED ALLERGENS

Gov.uk Trading Standards 'Food Allergy and Intolerance Advice for Consumers Guidance (2020)' identifies the following at allergens as the most potent and prevalent:

- Celery.
- Cereals containing gluten (such as wheat, rye, barley and oats).
- Crustaceans (such as prawns, crabs and lobsters).
- Eggs.
- Fish.
- Lupin.
- Milk.
- Molluscs (such as mussels and oysters).
- Mustard.
- Peanuts.
- Sesame.
- Soybeans.
- Sulphur dioxide and sulphites (at a concentration of more than ten parts per million).
- Tree nuts (such as almonds, hazelnuts, walnuts, brazil nuts, cashews, pecans, pistachios and macadamia nuts).

APPENDIX FIVE - EMERGENCY MEDICATION LOCATIONS

<u>Medication</u>	<u>Location</u>	<u>Photo of storage area</u>	<u>Closest landmark – building or internal feature</u>
<u>Emergency EpiPen</u>			
<u>Emergency Inhaler</u>			
<u>Defibrillator</u>			