ALLERGY SAFETY POLICY

Eastlands Primary School

Date	Review Date	Coordinator / Allergy Safety Lead	Nominated Governor
November 2026	November 2027	Samantha Warrington Katie McGuire	Sally Friswell Friel

Review cycle	Website publication	Committee
Annual and following serious incidents/near misses	Yes	Full Governing Body (FGB)

Purpose of this policy

To minimise the risk of any pupil, member of staff, volunteer, contractor or visitor suffering a serious allergic reaction while at Eastlands Primary School or taking part in a school-related activity, and to ensure that the school is prepared to recognise and respond promptly to allergic reactions and anaphylaxis.

This policy has been revised to have regard to the Department for Education statutory guidance Allergy safety in schools, published 6 July 2026, under the Children's Wellbeing and Schools Act 2026. It should be read alongside the school's arrangements for supporting pupils with medical conditions.

Links with other policies

- Child Protection and Safeguarding
- Administration of Medication
- Inclusion and SEND
- Equality Policy and Objectives
- First Aid
- Supporting Pupils with Medical Conditions
- Health and Safety
- Educational Visits

Named leadership

The named senior leader responsible for allergy safety is Samantha Warrington. The named staff responsible for coordinating allergy awareness and emergency response training and supporting the upkeep of this policy are Samantha Warrington and Helen Devine.

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1. Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. Reactions may be mild or moderate, but some reactions can develop into anaphylaxis, a serious and potentially life-threatening allergic reaction affecting the airway, breathing and/or circulation.

Allergy may include food allergy and allergies to medicines, insect stings, latex, animals, pollen and other airborne or contact allergens. Asthma can increase risk where it co-exists with food allergy. Food intolerance and coeliac disease require appropriate management but are not the same as an IgE-mediated food allergy.

Eastlands Primary School is committed to an allergy-aware culture in which pupils with allergies can participate safely and fully in school life and are not disadvantaged because of their medical condition.

2. Roles and responsibilities

Governing Body and Headteacher

- Ensure that an allergy safety policy is in place, published and reviewed at least annually.
- Ensure a named senior leader has responsibility for allergy safety.
- Seek assurance that appropriate emergency medication, training, risk-management and incident-review arrangements are in place.
- Ensure lessons from serious incidents and near misses inform policy and practice.

Parent/carer responsibilities

- Inform the school on admission, and promptly thereafter, of any diagnosed or suspected allergy, history of anaphylaxis and prescribed medication.
- Provide up-to-date medical information, an Allergy Action Plan where available, and prescribed medication in accordance with the child's healthcare arrangements.
- Ensure medication supplied for their child is in date and replaced as necessary, and notify the school of changes in allergy management.
- Work with the school and relevant healthcare professionals when an Individual Healthcare Plan is required, ensure it is provided to the school.

Staff responsibilities

- Complete required allergy awareness and emergency response training at least annually and as part of induction where applicable.
- Be aware of pupils in their care who have known allergies and of the arrangements recorded in relevant healthcare/action plans.
- Consider allergen exposure when planning food-related, craft, science, musical, animal-related and other activities.
- Know where prescribed and spare emergency medication is kept and how to summon help.
- Follow this policy and report allergic reactions, anaphylaxis and near misses promptly.

Pupil responsibilities

- Pupils will be supported to understand their allergy at an age-appropriate level and to tell an adult promptly if symptoms begin.
- Where clinically appropriate and agreed with parents and the school, pupils who are able to do so may carry their own prescribed emergency medication.

3. Identifying pupils, staff and visitors with allergy

The school will maintain appropriate records of individuals with a known allergy, including known allergens and whether emergency medication is carried or held. For pupils, records will also identify whether an Individual Healthcare Plan and/or Allergy Action Plan is in place.

For new pupils, relevant allergy information will be sought from parents/carers and, where appropriate, the previous setting. Arrangements should be in place for the start of term wherever possible. Where a pupil joins mid-term/year or is newly diagnosed, the school will make every effort to put appropriate arrangements in place promptly.

Staff, contractors, volunteers and visitors with allergies

- Members of staff should inform the school of a known allergy that may require arrangements at work, including whether they are at risk of anaphylaxis and whether they have been prescribed an adrenaline device.
- Appropriate arrangements for a member of staff with a known allergy will be discussed when they start work or when the school is notified of the allergy. Information will be shared only with those who need it for safety and support.
- Adults who have been prescribed adrenaline devices are responsible for bringing their prescribed devices to school, ensuring they are in date and keeping them readily accessible. The school will not determine or alter the dose prescribed to an adult.
- Where appropriate, visitors, volunteers and contractors will be asked in advance to tell the school about relevant allergies, particularly where food will be provided or the planned activity presents a known allergen risk.
- Visitors and contractors at known risk of anaphylaxis should bring their prescribed medication and keep it readily accessible while on site.
- The school’s reasonable measures to reduce exposure to known allergens apply to adults as well as pupils.

Contractors carrying out work with no pupil-facing role are not normally included in the requirement for school allergy awareness training; however, relevant site-specific safety information will be provided where necessary.

4. Individual Healthcare Plans and Allergy Action Plans

A pupil will have an Individual Healthcare Plan (IHP) where their allergy has a functional impact in school, places them at risk of harm and requires arrangements that are additional to or different from those made generally. The IHP will set out the agreed arrangements for supporting the pupil, including emergency arrangements.

Where a healthcare professional has issued an Allergy Action Plan or Asthma Action Plan, the IHP will refer to or attach it. The school recommends recognised plans such as those produced by the British Society for Allergy and Clinical Immunology (BSACI), where appropriate. Plans will be reviewed when new clinical information or an updated action plan is provided.

5. Emergency treatment and management of anaphylaxis

What to look for

Symptoms of an allergic reaction can develop rapidly. Mild to moderate symptoms may include hives or rash, tingling or itching in the mouth, swelling of the lips, face or eyes, abdominal pain or vomiting.

Anaphylaxis may involve:

- AIRWAY - swelling of the throat or tongue, throat tightness, hoarse voice or difficulty swallowing.
- BREATHING - sudden wheeze, breathing difficulty or noisy breathing.
- CIRCULATION - dizziness, collapse, confusion, pale or clammy skin, or loss of consciousness.

Emergency action

- Keep the individual where they are, call for help and do not leave them unattended.
- Lie the individual flat with legs raised. If breathing is difficult, they may need to be propped up, but avoid unnecessary changes of position. Do not make them stand or walk.
- Bring the adrenaline device to the individual. Do not take the individual to the medication.
- Administer adrenaline without delay into the outer thigh in accordance with the device instructions. In practice adrenaline should be administered as soon as possible and within five minutes.
- Call 999 immediately and state ANAPHYLAXIS. Do not delay adrenaline while waiting to contact the emergency services.
- If symptoms have not improved after 5 minutes, administer the second adrenaline device.
- If there are no signs of life, commence CPR.
- For a pupil, contact the parent/carer as soon as practicable after emergency action is underway.
- Any individual treated for anaphylaxis requires emergency medical assessment and onward care.

6. Supply, storage and care of prescribed medication

Children prescribed adrenaline should have rapid access to their devices at all times, including classrooms, dining areas, playgrounds, sports areas and on visits or trips.

Where a pupil is too young or otherwise unable to carry their medication, the medication will be stored in an appropriate, readily accessible and unlocked location known to staff. A copy of the pupil's current action plan should be kept with the medication where practicable.

Individual prescribed medication will be clearly labelled for the named pupil. Where the action plan requires it, the pupil's emergency kit may include prescribed adrenaline devices, antihistamine (as tablets or syrup), spoon if required and asthma medication (if included on the plan).

AAIs - i.e. EpiPen® or Jext® or Emerade® - will be stored at room temperature and protected from direct sunlight and temperature extremes. Used AAIs contain a needle and will be handed to ambulance staff where appropriate or disposed of through the school's approved sharps/clinical-waste arrangements. Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

7. School spare adrenaline devices

Eastlands Primary School will maintain spare adrenaline auto-injectors (AAIs) for emergency use in accordance with current statutory guidance.

For a primary school spanning both age groups, the school will normally hold:

- one pair (two devices) of 150 microgram AAIs for children under 6 years of age;
- one pair (two devices) of 300 microgram AAIs for individuals over 6 years of age.

Spare AAIs will be stocked and stored in pairs so that a second device is immediately available if required. They will be in a clearly labelled emergency anaphylaxis kit, readily accessible and not locked away, and their location(s) will be known to staff. Eastlands Primary School spares are kept in the following location/s:- School staffroom cupboard (wall).

The school will ensure that an appropriate pair of adrenaline devices can be brought to a pupil experiencing anaphylaxis within five minutes from wherever they may reasonably be on the school site. The school will check this across classrooms, dining areas, playgrounds, outdoor provision and sports areas. If this cannot reliably be achieved from one location, an additional pair or pairs of the appropriate dosage will be provided at a further accessible location.

The current emergency anaphylaxis kit location will be subject to this five-minute accessibility check. The designated First Aider will check spare devices monthly for presence, condition and expiry and arrange replacement promptly following use or expiry.

Use of spare devices

- If the individual has their own prescribed adrenaline device immediately available, this should be used in the first instance.
- If the prescribed device is unavailable or misfires, a school spare device may be used.
- If an individual develops suspected anaphylaxis without having a prescribed device available, a school spare adrenaline device may be used for the purpose of saving life.
- Emergency treatment must not be delayed while seeking consent. Prior consent is not required in an emergency where reasonable action is needed to save life.

The school is not required by the July 2026 DfE school stock table to hold a separate 500 microgram adult AAI. Adults with known risk of anaphylaxis should bring their own prescribed devices. The school's

spare arrangements are maintained for emergency use in accordance with the statutory guidance and applicable medicines legislation.

8. Staff training and allergy awareness

All staff will receive allergy awareness and emergency response training at least annually. This includes permanent and temporary staff and staff supervising lunch and before and after-school provision.

Training will cover:

- awareness of allergy and common triggers;
- recognition of allergic reactions and anaphylaxis;
- emergency response including calling 999;
- locating and administering emergency medication;
- use of prescribed and school spare devices;
- reducing exposure to known allergens;
- the school policy and relevant plans;
- reporting incidents and near misses.

New staff and relevant cover/supply staff will receive appropriate induction information. Practical familiarisation with trainer adrenaline devices will form part of the school's arrangements where provided.

9. Inclusion, wellbeing and safeguarding

Eastlands Primary School will support pupils with allergy to participate fully in school life and will make reasonable adjustments where required. The school recognises that allergy and the risk of anaphylaxis can affect wellbeing. Allergy-related teasing, bullying, deliberate exposure or exclusion will be addressed through the school's behaviour, anti-bullying and safeguarding arrangements.

10. Catering and safer eating

The school and its catering provider will comply with applicable food-information and allergen requirements and will make allergen information available for food provided by the school. The school office will share relevant pupil allergy information with the Catering Manager through appropriate, secure arrangements, including the school's Cypad/ABM catering arrangements where used.

- Food, drinks and lunch boxes brought in for a pupil with allergy should be clearly identifiable where appropriate.
- Processes will be used to reduce cross-contact during food preparation, handling and serving.
- Food will not be given to a primary-aged pupil with known food allergy without the necessary parent/carer engagement and permission.
- Allergen risks will be considered when food is used in curriculum activities, celebrations, fundraising or special events.

11. School trips, visits and sporting activities

Pupils with allergy should be enabled to participate in educational visits, residential visits and sporting activities wherever reasonably possible. Visit risk assessments will identify relevant allergen risks and the arrangements necessary to manage them.

Pupils at risk of anaphylaxis will have their prescribed adrenaline devices with them, and staff able to respond to an emergency will be present. The trip leader will check relevant medication before departure and ensure that medication remains readily accessible throughout the visit. Venues and catering providers will be given relevant information in advance where required.

12. Allergy awareness and reducing exposure

Eastlands Primary School adopts an allergy-aware approach rather than relying solely on blanket allergen bans. No school can guarantee a completely allergen-free environment. The school will take reasonable steps to minimise exposure to known allergens and will make proportionate arrangements according to the needs of identified individuals.

Staff planning activities will consider potential allergen exposure, including food brought from home, cooking, craft, science, music, animals, contact allergens and airborne allergens. Where specific risks are identified, they will be addressed through individual arrangements and risk assessment.

13. Risk assessment

The school will assess allergy-related risks for pupils whose needs require individual arrangements, including pupils joining the school and pupils who are newly diagnosed. Risk assessments will consider known allergens, the school environment, eating arrangements, curriculum activities, external visits and the accessibility of emergency medication.

The school will also keep the location of spare adrenaline devices under review and will verify that the five-minute access standard can be met from relevant areas of the site.

14. Serious incidents and near misses

The school will record, report and review serious allergy-related incidents and near misses. A near miss includes an event in which harm was avoided but the circumstances identify a weakness or potential risk in arrangements.

- Immediate medical and safeguarding needs will be addressed first.
- Relevant details of the incident or near miss will be recorded in accordance with school procedures.
- Parents/carers will be informed where the incident concerns a pupil.
- The Allergy Safety Lead will review the circumstances, including whether existing controls, healthcare plans, training, catering, communication or access to medication require change.
- Lessons identified will be translated into revised risk controls, training or policy as appropriate, and significant matters will be reported through the school's governance arrangements.

15. Information sharing and confidentiality

Information about allergy and medical conditions will be shared with staff and other relevant people on a need-to-know basis so that individuals can be supported safely. Health information will be handled in

accordance with the school's data-protection arrangements. Where photos or allergy lists are displayed in staff-only areas to support safe food handling or emergency response, access will be appropriately controlled.

16. Policy monitoring and review

This policy will be reviewed at least annually. It will also be reviewed sooner where a serious incident, near miss, significant change in statutory guidance, change in the school's circumstances or learning from practice suggests that amendment is required.

The Governing Body will receive appropriate assurance that the policy is implemented, staff training is current, emergency medication arrangements are effective, and learning from incidents and near misses is acted upon.

17. Useful links

- Department for Education - Allergy safety in schools (statutory guidance and template): https://www.gov.uk/government/publications/allergy-safety-in-schools
- Department for Education - Supporting pupils at school with medical conditions: https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3
- Anaphylaxis UK: https://www.anaphylaxis.org.uk/
- Allergy UK: https://www.allergyuk.org/
- BSACI paediatric allergy action plans: https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/
- Spare Pens in Schools: http://www.sparepensinschools.uk/

Policy status

Revised November 2026 following publication of the Department for Education statutory guidance Allergy safety in schools (6 July 2026), incorporating arrangements for adults on site, Individual Healthcare Plans, spare AAI dosage and paired storage, five-minute accessibility, and incident/near-miss learning.