

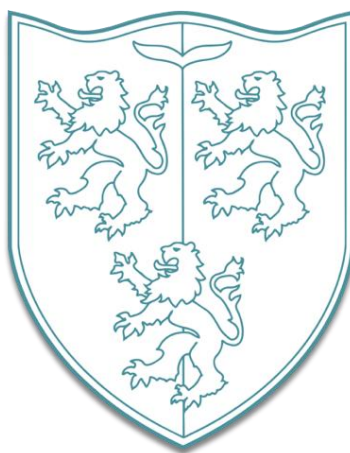
Date of last review:	September 2026	Review period:	Annual
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Pembroke Park Primary School

Allergy Policy

‘Empowering a Future Generation’



History of Policy Changes

Date	Section	Change	Origin of Change
Sept 2026		New policy for September 2026	

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1 Policy Aims and Objectives

The aim of this policy is to provide a safe and inclusive environment for all pupils, staff and visitors with allergies. The school recognises that allergies can have a significant impact on an individual's health and wellbeing and that severe allergic reactions (anaphylaxis) can be life-threatening.

This policy outlines the school's responsibilities for identifying, managing and responding to allergic conditions while promoting inclusion and reducing unnecessary risks.

The policy will include:

- How the school will deal with the management of allergies, including reducing the risk of exposure and the procedures in place in case of allergic reaction.
- How the school supports pupils with allergies to ensure their wellbeing and inclusion.
- How the school promotes and maintains allergy awareness among the school community.

The objectives of this policy are to:

- Identify pupils with allergies as early as possible.
- Reduce exposure to known allergens where reasonably practicable.
- Ensure staff understand allergy management.
- Respond effectively in an emergency.
- Support pupils to participate fully in school life.
- Work closely with parents, carers and healthcare professionals.

2 Legislation and Guidance

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

[The Food Information Regulations 2014](#)

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

3 Roles and Responsibilities

The School takes a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is Eleanor Pearce.

They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils (although the allergy lead has ultimate responsibility, the information collection itself may be delegated to other members of staff)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Regularly reviewing and updating the allergy policy

3.2 School First Aiders / Admin Staff

The school First Aider/ Admin Staff is responsible for:

- Co-ordinating the paperwork and information from families via forms/class dojo
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the allergy lead
- Will maintain and keep up to date the Schools Allergy register via medical tracker
- Ensuring all staff and visitors/volunteers have appropriate allergy awareness training
- Logging emergency procedure practices

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of pupils with allergies

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Knowing how to raise the alarm in an emergency
- Knowing the risks involved with touching the medication of others

Older pupils might also be expected to support their peers and staff in the case of an emergency.

4 Assessing Risk and Individual Healthcare Plans

An Individual Healthcare Plan will be produced for every pupil with a diagnosed allergy where there is a risk of an allergic reaction, particularly where there is a risk of anaphylaxis. The plan should be developed in partnership with the pupil (where appropriate), parents or carers, healthcare professionals and relevant school staff.

The individual Healthcare Plan should include:

- Photo of the pupil
- Known allergens
- Signs and symptoms
- Specific medical information to the pupils allergy
- Medication prescribed
- Emergency procedures
- Emergency contacts
- How the allergy is managed on a daily basis
- Responsibilities of Parents, Teachers, First Aiders etc
- How the staff are going to be made aware of the allergy/ emergency procedures
- Consent from the parent for the school to administer medication

Individual Health care plans should be reviewed annually or as and when allergic reactions occur.

The School will also need to consider the risks for the pupil taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips

Any other activities involving animals or food, such as animal handling experiences or baking

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

5 Preventing Exposure to Allergens and Minimising Risk

5.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles
- Tables are cleaned before and after eating
- Staff are vigilant to restrict cross contamination
- Where possible children with allergies will sit with children who do not have any known allergens in their food

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies. The school caterers are Edwards and Ward.

Edwards & Ward Responsibilities:

Provide accurate allergen information for the food we serve.

Operate a central Special Diets registration and assessment process for pupils requiring medically prescribed diets.

Ensure catering staff receive appropriate allergen and food safety training and anaphylaxis awareness training.

Prepare and serve meals safely in accordance with approved medical diet requirements and our Medical Diets Policy.

Provide suitable meals for pupils with approved medical diets, including educational visits where arrangements have been agreed in advance.

Provide schools, parents and carers with access to standard menus, allergen information and the central Special Diets registration process.

School menus are available for parents/carers to view with ingredients clearly labelled.

Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils.

Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all [legal requirements](#) that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA).

Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction.

These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

- If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated.

5.4 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- Care should be taken in and around bin areas
- Areas will be checked and cleared of any attractants and preventative measures taken if needed
- Plants will be removed if they pose a risk

5.5 Animals

All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact

Pupils with animal allergies will not interact with animals

5.6 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care/interventions
- Regular check-ins with their [class teacher/pastoral staff]

5.7 Events and school trips

For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part.

The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training. Risk assessments to limit reaction and to safely carry medication and use it will be carried out.

Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips

6 Procedures for handling an allergic reaction

6.1 Register of pupils with AAI

The school maintains a register of pupils who have been prescribed AAI or where a doctor has provided a written plan recommending AAI to be used in the event of anaphylaxis. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)
- Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil
- A photograph of each pupil to allow a visual check to be made with parental consent

The register is kept on medical tracker and can be checked quickly by any member of staff as part of initiating an emergency response however all children with prescribed AAls will always have them with them.

6.2 Allergic reaction procedures

As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately

Staff are trained in the administration of AAls to minimise delays in pupil's receiving adrenaline in an emergency

If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan

- If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one

If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures

If someone is experiencing any of the following symptoms, it should be treated as a medical emergency:

-  **AIRWAY**– swelling in the throat, tongue or upper airways, hoarse voice, difficulty swallowing
-
-  **BREATHING**– sudden onset wheezing, breathing difficulty, noisy breathing, persistent cough
-
-  **CIRCULATION**– dizziness, feeling faint, sudden sleepiness, confusion, pale clammy skin, loss of consciousness or collapse

Follow these steps if you think you or someone you're with is having an anaphylactic reaction:

1. Use an adrenaline auto-injector (such as an EpiPen) if you have one – instructions are included on the side of the injector.
2. Call 999 for an ambulance and say that you think you're having an anaphylactic reaction.
3. Lie down – you can raise your legs, and if you're struggling to breathe, raise your shoulders or sit up slowly (if you're pregnant, lie on your left side).
4. If you have been stung by an insect, try to remove the sting if it's still in the skin.
5. If your symptoms have not improved after 5 minutes, use a 2nd adrenaline auto-injector.

Do not stand or walk at any time, even if you feel better.

A school AAI device will be used instead of the pupil's own AAI device if:

- Medical authorisation and written parental consent have been provided, or
- The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed and individual care plans followed e.g. other medications may be prescribed

Using "spare" adrenaline devices

Anaphylaxis is a medical emergency and can be fatal. The allergy awareness training provided to staff, will ensure all staff in schools, colleges and early years settings have received prior training in recognition and

management of anaphylaxis.

The Human Medicines (Amendment) Regulations 2017 permit “spare” adrenaline devices to be used for the purpose of saving a life.

This might be, for example, a child presenting for the first time with anaphylaxis due to an unrecognised allergy. In the event of an anaphylaxis reaction:

The child, young person or individual should be placed flat with legs raised. Adrenaline devices should be brought to them (whether their own prescribed AAls or “spare” AAls as opposed to the patient being taken to where the adrenaline devices are).

Adrenaline should be administered as soon as possible, within five minutes. Do not wait to contact the emergency services before administering adrenaline.

Immediately call 999 and request an ambulance. Continue to follow emergency procedures as set out above.

If the child, young person or individual has their own prescribed adrenaline devices, these should be used in the first instance.

If the child, young person or individual does not have prescribed adrenaline devices, “spare” adrenaline devices can be used.

If the child, young person or individual’s prescribed adrenaline devices are not available or misfire, “spare” adrenaline devices can be used.

Using “spare” ADs in an emergency situation without prior consent:

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for “spare” adrenaline devices to be used in an emergency. It is good practice for the school, college or setting to obtain advance consent from parents or the young person for “spare” adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place. However, in an emergency situation anyone may take reasonable action to save a life without checking whether prior consent has been given, in order to avoid delays in treatment.

7 Adrenaline auto-injectors (AAls)

7.1 Purchasing of spare AAls

The allergy lead/office manager is responsible for buying AAls and ensuring they are stored according to the guidance. The allergy lead/office manager will have a signed letter from the Headteacher requesting the purchase of AAls for the School.

- We will purchase our spare AAls from: Medisupplies
- 4 are required – 2 of each dose – AAls for children under 6 – 150mg and AAls for children over 6 300mg however 8 – 4 of each dose is preferable to allow a set to be taken on offsite visits.

7.2 Storage (of both spare and prescribed AAls)

The allergy lead will make sure all AAls are:

- Stored at room temperature (in line with manufacturer’s guidelines), protected from direct sunlight and extremes of temperature in pairs
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times
- **Not** located more than 5 minutes away from where they may be needed
- Spare AAls will be kept separate from any pupil’s own prescribed AAI and clearly labelled to avoid confusion.

- Spare AAls will be kept in Mrs Hewes office and will be clearly labelled that they are spare and as to which dose is which. Along with Instructions on how to use the device(s). Instructions on storage of the AAI device(s). Manufacturer's information.

7.3 Maintenance (of spare AAls)

Kate Taylor and Eleanor Pearce are responsible for checking monthly that:

- The AAls are present and in date
- Replacement AAls are obtained when the expiry date is near
- A checklist of injectors, identified by their batch number and expiry date with monthly checks recorded will be kept along with a note of the arrangements for replacing the injectors.

7.4 Disposal

AAls can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions, but if used they will be given to the paramedic to take with them. If needed Wiltshire council will provide sharps bin/collect for safe disposal. Once expired the AAI will be disposed of in a sharps bin provided by Wiltshire Council.

7.5 Use of AAls off school premises

Pupils at risk of anaphylaxis who are able to administer their own AAls should carry their own AAI with them on school trips and off-site events

A set of spare AAls of the correct dose will be taken on all off site trips.

7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAls
- Instructions for the use of AAls
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils to whom the AAI can be administered who already have their own AAls
- A record of when AAls have been administered

8 Training

The school is committed to training all staff in allergy response. This training will be provided to staff via Winterbury training.

The training will include:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis

- Where AAls are kept on the school site, and how to access them
- How to administer AAls
- The wellbeing and inclusion implications of allergies
- It's recommended that all staff are trained at least once a year.

9 Reporting of Anaphylaxis Events

In the event of an anaphylaxis event occurring the school will follow the normal reporting procedures of logging a medical event on Every Compliance.

This includes:

- **A serious incident** is any event relating directly to a medical condition (including allergy) in which a child, young person, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.
- **A near miss** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so, for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

Every Compliance will notify Head of Estates, Estates Advisor, Headteacher and Head of Safeguarding allowing for a quick investigation to be conducted. Investigation templates are available to schools on Every Compliance to support with investigating the near miss or serious incident.

10 Links to other Policies

- This policy links to the following policies and procedures:
- Health and safety policy
- Supporting pupils at School with medical conditions policy
- School food policy
- School behaviour and bullying policy