Little Way Catholic Educational Trust

Allergy Policy

Version:	2		
Approved by:	Trust Board	**Date:**	Summer 2026
Next review due by:	Summer 2029		

Version	***Updates***
1	*Original production*
2	*Minor changes in text as a whole and none to any process related text apart from a review and update around AAI in line with national guidance. Major formatting updates across the whole document.* *Introduction of appendix documents*

Aims and Objectives

This policy aims to:

- *Set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction*
- *Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion*
- *Promote and maintain allergy awareness among the school community*

Legislation and statutory guidance

This policy is based on:

- *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: https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools*
- *The Food Information Regulations 2014*
- *The Food Information (Amendment) (England) Regulations 2019*

Role and Responsibilities

First Aid Lead
The nominated first aid lead in each school is:

School	***Name***	***Position***
St Catharine's Catholic Primary School		
St Joseph's Catholic Primary School		
Catholic School of St Gregory The Great		
St Peter's Catholic Primary School		
The Rosary Catholic Primary School		
St Thomas More Catholic Primary School		

They're responsible for:

- *Promoting and maintaining allergy awareness across our school community*

- *Recording and maintaining allergy and special dietary information as provided by parents or qualified medical professionals for relevant pupils.*
- *Ensuring all allergy information provided by parents or medical professionals is kept up to date and accessible to relevant members of staff.*
- *Parents or guardians provide an allergy action plan for pupils with known allergies. The school will follow the guidance provided in these plans to support pupil safety.*
- *All staff receive allergy awareness training in line with their role and responsibilities, as determined by LWCET.*
- *All staff are made aware of the Trust's allergy policy and any school-level procedures for managing allergy-related risks, including communication, response, and emergency protocols.*
- *Activities that may present allergy risks should be identified by senior staff or those with designated responsibility, in consultation with LWCET. Staff involved in these activities must be informed and supported by trained personnel in completing or following risk assessments.*
- *Keeping stock of the school's adrenaline auto-injectors (AAIs)*

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*
- *Receive allergy awareness training in line with their role and responsibilities, as determined by School .*
- *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*

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*

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*

Pupils without allergies
These pupils are responsible for:
- *Being aware of allergens and the risk they pose to their peers*

Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis 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.

Managing risk

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*

Catering
- *The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.*
- *Catering providers are contractually required to ensure their staff receive appropriate allergen awareness training and are able to identify and cater safely for pupils with known allergies.*
- *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*

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.

Insect bites/stings
When outdoors:
- *Shoes should always be worn*
- *Food and drink should be covered*

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.*

Support for mental health
Pupils with allergies will have additional support through:
- *Pastoral care*
- *Regular check-ins with their Teacher*

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

Procedures for handling an allergic reaction

Register of pupils with AAIs
The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs 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 (this will require parental consent)*
- *The register is kept in every classroom and can be checked quickly by any member of staff as part of initiating an emergency response*

Allergic reaction procedures
As part of the whole-school awareness approach to allergies, all staff will be receiving training via iamcompliant. Each school will have their own procedure for dealing with an allergic reaction, which a copy will be made available to the trust and to anyone on request.

Where a pupil may require the use of an adrenaline auto-injector (AAI), a group of staff will, by mutual agreement, be trained in its administration. This is to help ensure that in the event of an emergency, there is not a delay in locating a suitably trained member of staff.

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.

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*

Adrenaline auto-injectors (AAIs)

Purchasing of spare AAIs
- *The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance.*

Storage (of both spare and prescribed AAIs)
The allergy lead will make sure all AAIs are:

- *Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature*
- *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 AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.*

Maintenance (of spare AAIs)
The below staff are responsible for checking monthly that:
- *The AAIs are present and in date*
- *Replacement AAIs are obtained when the expiry date is near*

School	***Name***	***Position***
St Catharine's Catholic Primary School		
St Joseph's Catholic Primary School		
Catholic School of St Gregory The Great		
St Peter's Catholic Primary School		
The Rosary Catholic Primary School		
St Thomas More Catholic Primary School		

Disposal
AAIs can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions

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

Emergency anaphylaxis kit
The school will at all times holds at least 2 spare AAI's.

Spare AAIs
- *All Instructions on storage must be followed, following all 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*
- *A record of when AAIs have been administered*

Training

The Trust and each school is committed to training all staff in allergy response. This will be done via our iamcompliant system. This includes:

- *Identify the most common food allergies*
- *Recognise different allergen-containing foods*
- *Describe the different reactions associated with food allergies*
- *Explain what to do in the event of a severe allergic reaction*

Extract from Supporting Children With Medical Conditions Policy

Some pupils may suffer anaphylactic shock through a severe and sudden reaction to insect bites, nut allergy etc.

In the case of a child being identified by a doctor as being at risk of anaphylaxis:

- *Two adrenaline auto-injectors (such as Epi Pen etc) must be provided to the school. These must be clearly labelled with the child's name.*
- *Parents / carers must complete the administration of medicines form or a care plan (in partnership with healthcare professionals), depending on the level of needs, to allow a student to bring adrenaline auto-injectors to school.*
- *School staff will administer adrenaline auto-injectors in emergency situations where anaphylaxis is suspected. Wherever possible, this will be undertaken by staff who have received appropriate training. However, in a life-threatening emergency, the absence of training must not prevent a member of staff from administering an adrenaline auto-injector.*
- *School staff will understand that adrenaline auto-injectors are a risk-free treatment and a one-shot injection which can do no harm but may relieve a potentially high-risk medical condition.*
- *Adrenaline auto-injectors are only to be used by/for the pupil for whom they are prescribed.*
- *The school will hold a minimum of 2 emergency adrenaline auto-injectors on site for use in an emergency, in accordance with appropriate guidance.*
- *Parents/carers of children who are known to be at risk of anaphylaxis will be informed and their consent for use of the emergency auto-injector will be sought.*
- *In exceptional circumstances, where anaphylaxis is suspected and prior consent has not been obtained, staff may administer an emergency adrenaline auto-injector if it is considered necessary to preserve life, in line with national guidance.*
- *In all cases, staff will act in accordance with professional guidance and will prioritise the safety and wellbeing of the child.*

Links to other policies

- *Health and safety policy*
- *Supporting pupils with medical conditions policy*

Appendix A: Benedicts Law – School Readiness Checklist

- ✓ *All schools hold spare adrenaline auto-injectors.*
- ✓ *All staff complete annual allergy awareness training.*
- ✓ *Individual Healthcare Plans in place for pupils with allergies.*
- ✓ *Anaphylaxis (and allergy) action plans stored with medication.*
- ✓ *Allergy register maintained and regularly reviewed.*
- ✓ *Emergency procedures displayed appropriately across the school.*
- ✓ *Incidents and near misses recorded and reviewed.*
- ✓ *Trip risk assessments include allergy management.*
- ✓ *Medication storage checked regularly for expiry.*

Appendix B: Emergency Anaphylaxis Flowchart

1. *Suspect an allergic reaction.*
2. *Check symptoms: breathing difficulty, swelling of lips/tongue, wheezing, dizziness, collapse.*
3. *If anaphylaxis suspected: administer adrenaline auto-injector immediately.*
4. *Call 999 – state 'Anaphylaxis – adrenaline administered'.*
5. *Lie pupil flat (or allow sitting if breathing difficult).*
6. *If symptoms continue after 5 minutes give second AAI if available.*
7. *Inform school office and parents.*
8. *Record the incident.*

Appendix C: Allergy Register Template

Pupil Name	*Year/Class*	*Allergen*	*Reaction Severity*	*Medication Required*	*Healthcare Plan in Place (Y/N)*	*Medication Location*	*Notes*

Appendix D: Allergy & Anaphylaxis Incident Report Form Example (Word copy available, rather than screenshot)

Allergy & Anaphylaxis Incident Report Form (Benedict's Law Aligned)

Student Details

Student Name:
Date of Birth:
Year Group/Class:
Known Allergies:

Individual Healthcare Plan (IHCP) in place?
☐ Yes ☐ No

Incident Information
Date:
Time:
Location:
☐ Classroom ☐ Playground ☐ Club
☐ Dining Hall ☐ School Trip ☐ Other: _____

Staff member completing report:
Role:

Type of Incident
☐ Confirmed allergic reaction
☐ Suspected allergic reaction
☐ Anaphylaxis
☐ Accidental allergen exposure (no symptoms)
☐ Near Miss
☐ Medication issue
☐ Other

What Happened?
Provide a factual description of events.

Suspected Allergen
☐ Peanut ☐ Sesame ☐ Soya
☐ Tree Nut ☐ Fish ☐ Unknown
☐ Milk ☐ Shellfish
☐ Egg ☐ Wheat
☐ Other: _____

How did exposure occur?
☐ Eating ☐ Shared food ☐ Inhalation
☐ Cross-contamination ☐ Contact ☐ Unknown

Symptoms Observed
☐ Itching ☐ Abdominal pain ☐ Change in voice
☐ Rash/Hives ☐ Wheezing ☐ Collapse
☐ Swelling ☐ Persistent cough ☐ Other
☐ Vomiting ☐ Difficulty breathing
Time symptoms first noticed:

Immediate Actions Taken
☐ Student monitored
☐ Emergency medication administered
☐ Antihistamine given
☐ Adrenaline Auto-Injector used

Number of doses:
Time(s) administered:
By whom?
☐ 999 called

Time called:
☐ Parents informed
Time informed:
☐ Student taken to hospital
Hospital:

Was the Student's Healthcare Plan Followed?
☐ Yes ☐ Partially ☐ No
If no or partially, explain:

Contributing Factors
Tick all that apply.
☐ Incorrect food provided
☐ Food not labelled
☐ Cross contamination
☐ Staff communication
☐ Student error
☐ Visitor brought food
☐ Catering issue
☐ Trip/activity issue
☐ Healthcare plan unavailable
☐ Medication unavailable
☐ Staff training issue
☐ Other
Comments:

Outcome
☐ Returned to class
☐ Sent home
☐ Ambulance attended
☐ Hospital assessment
☐ Hospital admission
Other:

Follow-Up Actions
☐ Parents meeting arranged
☐ Review of Healthcare Plan
☐ Staff debrief completed
☐ Catering informed
☐ Risk assessment reviewed
☐ Staff retraining required
☐ Governing Body informed
☐ Local Authority informed (if applicable)
☐ RIDDOR/other reporting considered (where appropriate)
Other actions:

Lessons Learned
What could have prevented this incident?

What changes will now be made?

Review
Person responsible for follow-up:
Target completion date:
Date reviewed:
Actions completed:

Signatures
Completed by:
Signature:
Date:

Reviewed by
(Headteacher/DSL/SENCO/Allergy Lead):
Signature:
Date: