“Put your heart and soul into everything that you do.”
Purpose. Passion. Success.

Allergy Safety Policy

Intent
Pattishall CE Primary School is committed to an allergy-aware culture in which pupils with allergy are safe, included and able to participate fully in school life. We recognise that allergic reactions are unpredictable and that anaphylaxis is a time-critical medical emergency.

This is the school’s dedicated allergy safety policy. It sits alongside, but is separate from, the Supporting Pupils with Medical Conditions Policy.

Legislation and Statutory Guidance
This policy reflects:

- Section 100A of the Children and Families Act 2014, inserted by section 34 of the Children’s Wellbeing and Schools Act 2026, requiring schools to have, review, publicise and publish an allergy safety policy.
- DfE statutory guidance Allergy safety in schools (July 2026).
- Section 100 of the Children and Families Act 2014 and DfE statutory guidance Supporting pupils with medical conditions at school.
- Human Medicines Regulations 2012 as amended in 2017, which permit schools to obtain and use spare adrenaline auto-injectors (AAIs) for emergency use.
- Equality Act 2010, Health and Safety at Work etc. Act 1974, SEND Code of Practice and KCSIE 2026.
- Relevant food-information and food-safety requirements applying to school catering.

Intent, Implementation and Impact

Intent
Known allergens are managed proportionately, emergency treatment is immediately available and pupils with allergy are included without unnecessary restriction or stigma.

Implementation
We identify pupils with allergy, create IHPs where supportive arrangements are required, train staff at least annually, work closely with families and healthcare professionals, minimise avoidable exposure, maintain prescribed and spare emergency medication, and learn from incidents and near misses.

Impact
Staff can recognise and respond to allergic reactions and anaphylaxis; pupils can access meals, learning, play, trips and activities safely; emergency medication is reachable within the required timeframe; and monitoring drives continuous improvement.

Leadership and Governance

Governing Body

- Ensure the school has a dedicated allergy safety policy and reviews it at least annually.
- Ensure the policy is made known within school, to parents and pupils, and is published on the school website.
- Ensure allergy risks are actively managed and sufficient staff training, equipment and resources are available.
- Receive periodic anonymised reports on serious incidents, near misses and lessons learned.

Named Senior Leader for Allergy Safety
The Headteacher is the named senior leader responsible for allergy safety and may delegate day-to-day coordination to the SENDCo/Medical Needs Coordinator. Responsibility includes implementation, training, emergency stocks, communication, incident review and annual policy review.

Identifying Pupils with Allergy

- Parents/carers are asked to disclose allergies at admission and to update the school immediately following diagnosis, reaction, medication change or new clinical advice.
- The school maintains an up-to-date allergy register and ensures relevant staff, including supply staff and catering staff, receive the information they need.

- Any pupil whose allergy requires supportive arrangements in school will have those arrangements captured in an IHP.
- The IHP will refer to the most recent Allergy Action Plan, Asthma Plan or other healthcare plan provided by a healthcare professional where one exists.

Individual Healthcare Plans for Allergy

The IHP will be developed with the pupil, parents/carers and relevant healthcare professionals where appropriate. It will cover known allergens, signs and symptoms, medication, storage and access, emergency response, food/catering arrangements, participation in activities, reasonable adjustments, self-management and staff who need to know.

IHPs will be reviewed at least annually and sooner after any serious incident, near miss, change in allergy, new clinical advice, change in medication or transition. Pupils will be encouraged to take increasing responsibility for managing their allergy where this is safe and appropriate.

Allergy Awareness Training

All staff present while pupils are scheduled to be on site will receive allergy awareness training at least annually. This includes permanent, temporary and supply staff, peripatetic staff, agency workers, regular volunteers, catering staff and adults supervising breakfast or after-school clubs. First-aid training alone is not sufficient.

Training will enable staff to understand allergy risks, recognise mild reactions and anaphylaxis, locate emergency medication, administer adrenaline and emergency asthma medication where appropriate, call 999, inform parents and follow individual plans. Additional pupil-specific or procedure-specific training will be provided when required.

An Allergy-Aware Environment

Pattishall will minimise reasonably foreseeable exposure to known allergens through individual risk assessment, safe food handling, cleaning, supervision, communication and planning. We will not describe the school as “nut-free”, because this can create a false sense of security and does not address the full range of allergens. We will operate an allergy-aware approach and may discourage particular foods where this forms part of proportionate risk reduction.

- Food sharing will be discouraged where it creates an allergy risk.
- Hands, tables and equipment will be cleaned appropriately after food activities and meals.
- Curriculum and craft materials will be checked where a known allergen could be present.
- Catering staff will use robust systems to identify pupils with allergies and provide safe meals while managing cross-contamination risk.
- Pupils with allergy will not be isolated unnecessarily or treated in a way that undermines inclusion and wellbeing.

Prescribed Adrenaline Devices

Clinical advice recommends that people at risk of anaphylaxis have access to two prescribed adrenaline devices at all times because a second dose may be required. Pupils who can self-manage will be supported to carry their prescribed devices. Otherwise, the devices will be held by the class teacher or in another agreed immediately accessible location, according to the pupil’s age and IHP.

Prescribed adrenaline devices must not be locked away or stored where access is restricted. They will be kept at room temperature, protected from extremes of heat and direct sunlight, and be available wherever the pupil is on site or off site.

School Spare Adrenaline Auto-Injectors

Pattishall keeps spare AAIs in the school office in a clearly marked emergency anaphylaxis kit. The office is a central location and the kit must be immediately accessible to staff at all times while pupils are on site; it must not be locked away or placed somewhere with restricted access.

The school stocks spare AAIs in pairs and in the appropriate doses for primary-aged pupils, including age/dose groups needed for younger and older pupils. Stock levels and doses will be kept under review as the school cohort changes. Devices must be capable of reaching a person experiencing anaphylaxis within five minutes.

- The emergency kit will include clear instructions and will normally be stored alongside the school emergency salbutamol inhaler and spacer.
- A named member of staff will check spare devices regularly for expiry, damage and stock levels and arrange prompt replacement after use or before expiry.

- Spare AAIs are additional emergency stock and do not replace a pupil’s prescribed devices.
- Advance consent for use of a spare AAI will be sought as good practice where possible; however, prior consent does not need to be checked in a life-threatening emergency and must not delay treatment.

Recognising and Responding to Anaphylaxis

Anaphylaxis involves serious problems with Airway, Breathing or Circulation and must be treated immediately with adrenaline. If in doubt whether a reaction is anaphylaxis, staff should treat with adrenaline and call 999.

- Keep the person lying flat with legs raised where possible; if breathing is difficult they may need to sit up carefully. Do not allow them to stand or walk.
- Bring adrenaline to the pupil - do not move the pupil to the medication.
- Give adrenaline as soon as possible and within five minutes. Do not wait to call emergency services before administering it.
- Use the pupil’s own prescribed device first if available; otherwise use the school spare AAI.
- Call 999 immediately and state “anaphylaxis”.
- If there is no improvement after five minutes, give a second dose of adrenaline using a second device.
- Never use a reliever inhaler instead of adrenaline to treat anaphylaxis. Where the pupil also has asthma, follow their Allergy Action Plan/Asthma Plan after adrenaline as advised.
- Stay with the pupil, continue to monitor them and ensure a parent/carer is informed as soon as possible.

Mild to Moderate Allergic Reactions

Staff will follow the pupil’s Allergy Action Plan/IHP. A pupil with a mild or moderate allergic reaction will be monitored closely because symptoms can progress. Current statutory guidance advises observation for at least 60 minutes after a mild reaction. If Airway, Breathing or Circulation symptoms develop, or staff are in doubt, treat as anaphylaxis immediately.

Emergency Asthma Inhaler

The school keeps an emergency salbutamol inhaler and spacer in the office alongside other emergency medication. The legal position is different from spare adrenaline: the school emergency inhaler may only be used where the pupil has been prescribed a reliever inhaler and written consent for use of the school emergency inhaler has been obtained.

Meals and Catering

The Headteacher and catering provider will work together with parents and pupils to identify and manage food-allergy risks. At least two robust methods should be used to identify pupils with known food allergies at mealtimes where practicable. Special diets and ingredient/allergen information will be managed in accordance with food-safety law and the pupil’s IHP.

Trips, Swimming, Forest School, PE and Clubs

Allergy must be considered early in planning off-site activities. The risk assessment will cover food, potential exposure, trained staff, access to emergency medication and access to emergency medical care. Pupils at risk of anaphylaxis must have their prescribed adrenaline devices with them. The school will consider taking spare AAIs where appropriate without leaving the school site without suitable emergency stock.

Serious Incidents and Near Misses

A serious incident or near miss involving allergy will be recorded as soon as feasible. Parents/carers will be informed promptly and given an opportunity to contribute to the review. The named senior leader will consider what happened, whether the policy/IHP was followed, whether the incident was foreseeable, and what changes are needed to training, systems, risk assessment, the IHP or this policy.

Relevant healthcare professionals will be informed where the incident relates to a professional care/action plan. Governors will receive periodic anonymised reports on serious incidents and near misses. Reviews will be conducted in a learning-focused, no-blame spirit while addressing any significant practice or capability concern appropriately.

Communication and Publication

The policy will be published on the school website and made available in hard copy on request. At least annually, the school will bring the policy to the attention of pupils, parents/carers and all people who work at the school. New and temporary staff will be briefed before taking responsibility for pupils.

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Monitoring and Review

The Headteacher will review this policy at least annually and sooner following a serious incident or near miss, a change in legislation or statutory guidance, or where monitoring identifies a weakness. Review will take account of pupil and parent voice and recent incidents. Allergy safety drills may be used to test the effectiveness of emergency arrangements.

Cross References

- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Safeguarding and Child Protection Policy
- SEND and Inclusion Policy / SEN Information Report
- Accessibility Policy and Plan
- Attendance Policy
- Anti-Bullying Policy
- Educational Visits procedures
- Health and Safety Policy
- School Food / Catering arrangements
- Complaints Policy