

Lady Katherine Leveson CE Primary School

‘Learning, Loving and Living with Joy’



ALLERGY & ANAPHYLAXIS SAFETY

Policy developed by: Laura Anderson
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Frequency of reviews: Annually

ALLERGY & ANAPHYLAXIS SAFETY

1. Purpose

To set out school-wide standards so that allergies are managed safely, anaphylaxis is responded to immediately, and pupils with allergies can participate fully in school life. This policy reflects the Department for Education (DfE) statutory guidance 'Allergy safety in schools' (July 2026) and aligns with the British Society for Allergy and Clinical Immunology (BSACI)/Allergy UK/Anaphylaxis UK Model Policy.

2. Scope

This is a school policy for Lady Katherine Leveson CE Primary School and Nursery. It applies to pupils, parents/carers, Local Academy Board members, all staff (including supply staff and contractors), volunteers and on-site caterers, both on site and during educational visits and other school activities.

3. Legal and guidance framework

- Children and Families Act 2014 (s.100), as amended by section 34 of the Children's Wellbeing and Schools Act 2026 (commonly referred to as 'Benedict's Law').
- DfE 'Allergy safety in schools' statutory guidance (July 2026) and DfE 'Supporting pupils with medical conditions at school'.
- Human Medicines (Amendment) Regulations 2017 and Department of Health and Social Care (DHSC) guidance: schools may purchase and hold spare Adrenaline Auto-Injectors (AAs) for emergencies.
- Medicines and Healthcare products Regulatory Agency (MHRA) safety update (2023): two AAs to be prescribed/carried and key emergency positioning/steps.
- BSACI/Allergy UK/Anaphylaxis UK Model Policy for Schools (DfE-supported).
- Food Information Regulations 2014 and “Natasha’s Law” requirements for Prepacked for Direct Sale (PPDS) food; Food Standards Agency (FSA) guidance for schools, colleges and nurseries.
- Equality Act 2010 (including reasonable-adjustment duties) and, where applicable to nursery provision, the Statutory Framework for the Early Years Foundation Stage (EYFS).

4. Guiding principles

1. Love in action: a safe, dignifying culture for pupils with allergies.
2. Inclusion: equitable access to curriculum, trips, events, and meals.
3. Preparedness: trained staff, clear plans, accessible medication.
4. Prevention first; swift response always.
5. Partnership: with families, healthcare professionals, caterers.
6. Continuous learning: robust incident logging and review.

In keeping with our vision to ***learn, love and live with joy***, we are committed to ensuring that no child is excluded, limited or made to feel different because of an allergy. Through careful planning, education and partnership with families, we seek to create a culture of belonging in which every child can participate safely and confidently in all aspects of school life.

5. Roles and responsibilities

- Birmingham Diocesan Multi-Academy Trust (BDMAT), as academy proprietor, retains statutory responsibility for allergy safety. Approval and oversight follow the BDMAT Scheme of Delegation; the Local Academy Board monitors implementation at school level.
- Headteacher: ensure a named senior leader is responsible for allergy safety, appoint a trained deputy, ensure annual staff training, and oversee this policy.
- All staff: complete annual training; know emergency procedures; never delay adrenaline if anaphylaxis suspected.
- Catering lead / providers: comply with Food Information Regulations 2014 (FIR 2014) and Natasha's Law, maintain accurate allergen information, and follow cross-contamination controls.
- Parents/carers: share medical/allergy information, supply two in-date AAls, and collaborate on the Allergy Action Plan/IHP.
- Pupils (age-appropriate): understand their plan; carry AAls as advised.

5.1 Allergy Aware Culture

- Allergy safety is a shared responsibility of all school staff.
- Allergies will be treated with the same seriousness as any other potentially life-threatening medical condition.

- The school promotes understanding, empathy and respect towards pupils with allergies.
- Allergy-related bullying, teasing, food intimidation or deliberate exposure will be treated as a safeguarding concern and dealt with under the Positive Relationships and Behaviour Policy and Anti-Bullying Policy.
- Pupils will receive age-appropriate education about allergies and anaphylaxis.

6. Identification, records and Individual Healthcare Plans (IHPs)

- On admission (and annually), the school collects allergy details and creates or updates an IHP incorporating an Allergy Action Plan issued by a healthcare professional where available.
- IHPs specify triggers, symptoms, medication, storage locations, supervision, adaptations (e.g., dining), and trip arrangements.
- Copies of IHPs are available to relevant staff, catering, and trip leaders with parental consent, respecting data protection.

7. Preventive controls (whole-school)

- Catering & food tech:
 - Maintain menu allergen matrices; verify suppliers; check labels at every delivery and recipe change; keep PPDS labels compliant (full ingredients; allergens emphasised).
 - Manage cross-contact (segregation, utensils, cleaning, signage).
- Classrooms / clubs / trips: pre-check activities, materials and venues; have AAls and IHPs to hand; brief supervising adults.
- Whole-school approach: tackle bullying linked to allergy; age-appropriate allergy education; consider “safe zones” (e.g., primary lunch tables) rather than blanket “nut-free” claims, unless clinically justified.

7.1 Educational Visits

- Ensure AAls accompany the pupil at all times.
- Ensure a trained member of staff is present.
- Check food arrangements and allergen information in advance.
- Brief accompanying volunteers and parent helpers where appropriate

8. Medication: provision, storage and access

- Parent-provided AAls: Pupils with known risk should have two in-date AAls available at all times (on person for older pupils or in a clearly marked, quickly accessible kit for younger pupils).
- Spare AAls (school-held): The school will hold appropriate-dose spare AAls, purchased without prescription using the DHSC template letter. They will be stocked in pairs, clearly labelled and stored unlocked in the school office, accessible within 5 minutes.
- Checks: Monthly checks of expiry, condition, quantity, with logs retained; immediately replace after use.

9. Training and drills

- All-staff annual training (induction + refresher) covering - recognising mild/moderate vs anaphylaxis, Airway, Breathing and Circulation (ABC) symptoms, positioning, calling 999 (“anaphylaxis”), using AAls, and post-incident actions.
- Supply teachers, agency staff, volunteers and student placements will receive allergy safety information as part of induction.
- Where relevant, they will be made aware of pupils with severe allergies in the classes they supervise.
- Emergency procedures and medication locations will be shared before they assume responsibility for pupils
- Practical drills termly (including dining hall scenarios), led by the Named Allergy Safety Lead or delegated trained staff.
- Records kept of attendees, competencies, and next refresh dates.

10. Emergency response (suspected anaphylaxis)

1. Lie child flat, legs raised (sit up if breathing is difficult). Give adrenaline immediately using AAI. If in doubt, give adrenaline.
2. Dial 999 (say “anaphylaxis”), send runner for second AAI, monitor ABC, repeat AAI after 5 minutes if no improvement.

3. Do not leave the pupil; commence cardiopulmonary resuscitation (CPR) if required.
4. Contact parents/carers and complete incident records; debrief and update IHP.

11. Dining, Prepacked for Direct Sale (PPDS) and “Natasha’s Law”

- Where the school produces Prepacked for Direct Sale (PPDS) foods (e.g. wrapped sandwiches made on site), labels must show the name of the food and a full ingredients list, with allergens emphasised; for non-prepacked foods, allergen information must still be provided (menu/notice or orally with clear process).
- Follow DfE 'Allergy safety in schools' statutory guidance and FSA training/resources for caterers.

12. Inclusion and reasonable adjustments

- Adapt activities, seating, and supervision so pupils with allergies fully participate (class, clubs, trips, exams), consistent with Equality Act duties and DfE medical conditions guidance.

13. Recording, reporting, learning

- Maintain: Allergy Register, IHPs, training logs, AAI stock logs, and incident/near-miss reports.
- After any incident/near-miss: review within 5 school days; update IHPs and controls where needed; brief staff; record lessons learned; and consider whether this policy or school procedures need amendment.

14. Governance and assurance

- The Headteacher will report on allergy safety to the Local Academy Board at least termly. Relevant assurance information will be provided to BDMAT in line with Trust governance arrangements.

- This policy will be reviewed at least annually and sooner following a serious allergy-related incident or near miss where changes may be needed. It will be published on the school website, accessible to staff and parents/carers, and available in hard copy on request.

15. Linked policies

- Supporting Pupils With Medical Conditions Policy; Child Protection & Safeguarding Policy; Anti-Bullying Policy; Positive Relationships and Behaviour Policy; Educational Visits Policy; First Aid and Medicines in School Policy; Health and Safety Policy; Food and Nutrition Policy; Complaints Policy and Procedures; and relevant BDMAT Data Protection policies and privacy notices.

Appendices

A. Allergy Action Plan / IHP Template

Use these clinically-approved national templates (BSACI / Allergy UK / Anaphylaxis UK):

1. BSACI Allergy Action Plans (Food, Non-Food, Drug)

These are the gold-standard templates recommended for UK schools, health professionals and parents.

<https://www.bsaci.org/resources/model-policy-for-allergy-management-at-school/>

2. Allergy UK & Anaphylaxis UK Model Policy Pack (includes editable IHP template & Action Plans)

<https://www.allergyuk.org/wp-content/uploads/2025/09/Model-Policy-for-allergy-at-school-v2.1-090124.pdf>

B. Monthly AAI (Adrenaline Auto-Injector) Stock Check Log

Use these documents for storage, expiry checks and emergency readiness:

1. DHSC “Guidance on the use of AAIs in schools” (includes stock check expectations)

https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf

2. Anaphylaxis UK – Spare AAI Guidance (with practical checklists)

<https://www.anaphylaxis.org.uk/education/essential-guidance-for-schools-on-using-spare-adrenaline-auto-injectors-aais/>

3. Spare AAI FAQ Guide (North East London Integrated Care Board (NEL ICB))

https://primarycare.northeastlondon.icb.nhs.uk/wp-content/uploads/2023/08/AAI_School_Guide_FAQ.pdf

C. Training Record & Emergency Drill Checklist

These resources are accepted nationally for training logs and emergency procedures:

1. DfE “Supporting pupils with medical conditions” (training logs & emergency templates)

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

2. Anaphylaxis UK Best Practice Guide (training + drill checklists)

<https://www.anaphylaxis.org.uk/wp-content/uploads/2024/04/Allergy-in-schools-Best-Practice-Guide.pdf>

D. Catering Allergen Controls & PPDS (“Natasha’s Law”) Checklist

1. FSA Natasha’s Law / PPDS Requirements (schools, nurseries, colleges)

<https://www.food.gov.uk/business-guidance/introduction-to-allergen-labelling-changes-ppds>

2. DfE Allergy Guidance for Schools (menu changes, allergen control, PPDS)

<https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools>

E. Template Letter to Pharmacy for Spare AAI

https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf