Severn Federation Academy Trust

'Learning together, with minds that think and hearts that care'

Trust, Friendship, Respect, Forgiveness, Courage, Truthfulness

ALLERGY POLICY

Ratified by:	**Board of Trustees**	In consultation with:	**SEND & Inclusion Lead**
Signed by:	 L. Davies, Chair of Trustees	Date:	**21st July 2026**
Policy Date:	**Summer Term 2 2026**	Review Date:	**Spring Term 1 2027**
Review Frequency:	**6 Months**		

Contents

1. Aims

This policy aims to:

- Set out our Trusts' approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction (details of individual procedures will be detailed in school procedure documents relevant to individual schools)
- Make clear how our schools support pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school's community

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

We take a Trust-wide approach to allergy awareness.

3.1 Trust Board Responsibilities

The Trust Board will:

- Ensure compliance with statutory allergy requirements.
- Monitor Trust implementation through safeguarding and health and safety reporting.
- Review allergy incident trends annually.
- Ensure sufficient resources are available for training and emergency medication.

3.2 Local Academy Committee Responsibilities

The Local Academy Committee will:

- Monitor school implementation through safeguarding and health & safety reporting
- Monitor training and incident logs through monitoring visits
- Oversee the review of the allergy procedure review annually or as required.
- Review the annual compliance check
- Complete required allergy training

3.3 Allergy Lead

There will be a nominated allergy lead in each school setting and this person will be named in each schools' procedure plan. This person will be a member of the Senior Leadership Team (SLT) who is also either a safeguarding lead or deputy safeguarding lead.

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 administrative staff or other first aid trained staff members)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils identified as requiring allergy management will have an Individual Healthcare Plan (IHP- see Appendix A) in accordance with the DfE statutory guidance on Allergy Safety in Schools and Supporting Pupils with Medical Conditions. The IHP will incorporate medical advice, emergency arrangements, medication requirements, risk-reduction measures and educational visit arrangements. Plans will be reviewed at least annually and following any significant allergic reaction.
- All staff receive an appropriate level of allergy training annually and a log kept of this (Appendix F)
- All staff are aware of the Trust 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 procedure within their setting and provide feedback and updates to the Trust Policy, at least annually or following an incident.
- Complete an annual compliance check (Appendix E)

3.4 School Administrators

The school administrator is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the allergy lead
- Check training records for volunteers, agency staff and other adults working on site such as peripatetic teachers

3.5 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

3.6 Regular Volunteers (including Governance Volunteers)

All volunteers are responsible for:

- Ensuring the wellbeing and inclusion of pupils with allergies
- 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
- Ensuring the wellbeing and inclusion of pupils with allergies

3.7 Parents/carers

Parents/carers are responsible for:

- Being aware of our Trust 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 two 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

3.8 Pupils with Known 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

3.9 Pupils Without Known Allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Older pupils might also be expected to support their peers and staff in the case of an emergency.

4. Assessing Risk

Each 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. (appendix B)

5. Managing Risk

Each school may include further adaptations to the following procedures according to their individual settings but all schools will follow the procedures set out below

5.1 Hygiene Procedures

Measures set out to prevent contamination in each school:

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 Catering

Each school is committed to providing safe food options to meet the dietary needs of pupils with allergies. The Allergy lead will ensure that:

- Catering staff receive appropriate training and are able to identify pupils with 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
- Where food is being provided for children by staff, i.e. for school Christmas parties, food labels will be checked and staff advised accordingly.

5.3 Food Restrictions

As a Trust, we acknowledge that it is impractical to enforce allergen-free schools. 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., or the food item may be removed from the child. The food item will be returned to the parent/carer at the end of the school day. The child will be offered an alternative snack or meal.

If schools have a tuck shop or a bake sale, we will not sell food containing nuts or seeds.

5.4 Insect Bites/Stings

To help reduce the likelihood of insect bites or stings when pupils are outside staff should

- Ensure that pupils always wear shoes
- Ensure that food and drinks are covered
- Ensure that outside bins have lids and are closed

5.5 Animals

To manage allergies to animals such as dogs:

- 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

The Severn Federation Academy Trust acknowledges that pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy. Behaviour policies outline plans to prevent bullying but pupils with allergies may also have additional support through:

- Pastoral care
- Regular check-ins with trusted adults in each setting.

5.7 Events and School trips

Each school within the Trust will:

- Ensure pupils with allergies are not be excluded from activities on the basis of their medical condition alone. Reasonable adjustments will be made to facilitate full participation in line with the Equality Act 2010.
- 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

6. Procedures for Handling an Allergic Reaction

6.1 Register of Pupils with AAIs

*Please also refer to Supporting Children with Medical Needs policy

Each school will maintain 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 should include:

- Full name.
- Date of birth.
- Photograph of the pupil (with parental consent).
- Known allergens.
- Severity of previous reactions.
- Prescribed medication.
- Location of medication.
- IHP review date.
- Emergency contacts.
- Consent status for spare AAIs.

The register is kept will be kept in an easily accessible location which will be detailed in the procedure plan and will be in a location which ensure it can be checked quickly by any member of staff as part of initiating an emergency response

It may be if a pupil is felt mature enough to keep their AAI with them that they do so which would reduce delays and allows for confirmation of consent without the need to check the register. This will be decided upon according to individual cases and will be in consultation with parent/carers and also the lead for allergy procedures in schools.

6.2 Allergic Reaction Procedures

As part of the Trusts approach to whole-school awareness 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 AAIs to minimise delays in pupil's receiving adrenaline in an emergency
- If a pupil has an allergic reaction, the staff member will initiate the individual 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. This will include the use of a school purchased AAI device if a child is presenting with the symptoms outlined by the NHS guidance of an anaphylaxis reaction https://www.nhs.uk/conditions/anaphylaxis/.Spare AAIs will only be administered where this is permitted by current legislation and DfE/DHSC guidance. Parental consent will be sought as a matter of course for all children to receive this in a case of emergency.

A spare AAI device will only 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.

6.3 Recording and Learning from Incidents and Near Misses

Each school will:

- Record all allergic reactions requiring first aid, medication or emergency intervention (appendix C).
- Record all near misses where exposure could reasonably have resulted in an allergic reaction (appendix D).
- Undertake a post-incident review following any moderate or severe allergic reaction.
- Identify actions to reduce future risk.
- Share learning with relevant staff.
- Report significant incidents through Trust safeguarding and health and safety procedures.

7. Adrenaline Auto-Injectors (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, each school will set its own procedures for AAI, covering these areas:

7.1 Purchasing of Spare AAIs

The allergy lead in each school is responsible for buying AAIs and ensuring they are stored according to the guidance. The schools procedure plans will include where these devices are to be purchased from, how many each school will have, which brand of AAI is being used in school (this should be a single brand where possible to avoid confusion) and the dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 and 12 of the DFE 'Guidance on the use of adrenaline auto-injectors in schools' the guidance)

7.2 Storage (of both Spare and Prescribed AAIs)

The allergy lead in each school 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.

(See pages 12 and 13 of the guidance)

7.3 Maintenance of School AAIs

Each school will have 2 staff members named in the school procedure plan who are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near

7.4 Disposal of AAI's

AAIs can only be used once, and once the AAI has reached its expiry date it must be disposed of.

Used AAI's are to be given to the paramedic upon arrival

Unused expired AAI's must be returned to a pharmacy

7.5 Use of AAIs off School Premises

Prior to all off-site visits each visit leader must confirm:

- Access to medication. 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.
- Availability of trained staff.
- Emergency medical arrangements.
- Catering arrangements where applicable.
- Communication with venue providers.
- Review of IHPs and risk assessments.

Each school will have its own procedure for taking spare AAIs for emergency use on school trips and off-site events which will be detailed within the school's procedure plan.

7.6 Emergency Anaphylaxis Kit

Each school will hold their own emergency kit which will include:

- Spare AAIs
- Instructions for the use of AAIs
- 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
- A record of when AAIs have been administered

8. Training

Each school within The Severn Federation Academy Trust is committed to training all staff in allergy response. This includes:

- 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 AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies
- Each school lead will ensure all employees, including temporary staff, volunteers, lunchtime supervisors, wraparound care staff and governors with relevant responsibilities, will receive allergy awareness training upon induction and thereafter at least annually.

9. Monitoring and Audit

Each school will complete an annual allergy compliance audit covering:

- Staff training compliance.
- IHP completion.
- AAI checks.
- Incident records.
- Near-miss records.
- Educational visits procedures.
- Audit outcomes will be reported to the Headteacher, Local Academy Committee and Trust leadership

10. Policy Monitoring and Review

This policy will be:

- Reviewed annually.

- Reviewed following any significant allergy incident.
- Updated following legislative or regulatory change.
- Approved by Trustees.

The Local Academy Committee will receive an annual report from the schools Allergy Leads summarising:

- Allergy incidents.
- Near misses.
- Staff training compliance.
- Completion of Individual Healthcare Plans.
- Outcomes of school allergy audits.

The Board of Trustees will receive an annual Trust-wide report summarising these details.

11. Links to Other Policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- School food policy
- Behaviour policy
- Educational trips policy
- Risk Assessment policy

This policy is available on the Trust website: www.sfat.uk/policies

(Appendices on next page)

APPENDIX 1: Individual Healthcare Plan Template

<table>
<tr><th colspan="2">NAME – Individual Healthcare Plan for allergy</th></tr>
<tr><td>Date of birth:</td><td rowspan="4">Current Photo</td></tr>
<tr><td>Year / class:</td></tr>
<tr><td>Emergency contacts:</td></tr>
<tr><td>Staff who need to be aware:</td></tr>
<tr><td colspan="2">Allergy:
Note what allergy the child or young person has.
Note any known allergens.
Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.</td></tr>
<tr><td colspan="2">How the allergy is managed:
Note any care or action plans or prescribed medication issued by healthcare professionals.
If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.
Note the extent to which the child or young person is able to take responsibility for managing their allergy.</td></tr>
<tr><td colspan="2">Impact on education:
Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.
Indicate how the allergy may impact on the child or young person's learning.
Indicate how the allergy may impact on the child or young person's emotional wellbeing.
If relevant, note any interaction between allergy and SEN.</td></tr>
<tr><td colspan="2">Arrangements for support:
Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.
Outline measures to reduce the risk of contact with known allergens.
Give details of the specific support or adaptations to manage food allergy at meal and snack times.
Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.</td></tr>
<tr><td colspan="2">Visits and trips:
Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.
Note any requirement for a risk assessment and prompts for specific issues which should be considered.</td></tr>
<tr><td colspan="2">Emergency response:
Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.
Otherwise summarise the signs or symptoms which would indicate an emergency.</td></tr>
</table>

Set out what to do in an emergency, including whom to contact. *If relevant, note where "spare" adrenaline devices are located.*	
Last discussed with parents:	**Date**
Issued by:	**Date:**
Next planned review:	**Date:**

AME – Individual Healthcare Plan for allergy **Annex: Medication needed while in school / college / setting**	
Non-prescription medication: *Record any <u>non</u>-prescription medication (e.g. oral antihistamines) which the child or young person may require to manage their allergy in the education setting* *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Parental consent:	**Date**:
Prescription medication: *Record any prescription medication for allergy prescribed by a healthcare professional (e.g. adrenaline).* *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access.* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Prescribed by:	**Date**:
Parental consent:	**Date**:
Use of "spare" adrenaline devices: *Note whether parental consent has been given to administer adrenaline (e.g. using "spare" adrenaline devices) in an emergency.*	
Parental consent:	**Date**:
Use of "spare" salbutamol inhaler: *If relevant (i.e. the child or young person is prescribed an asthma reliever inhaler), note whether consent has been given to use a "spare" salbutamol reliever inhaler.*	
Parental consent:	**Date**:

NAME – Individual Healthcare Plan for allergy Annex: Care or Action Plans issued by healthcare professionals	
Allergy / Asthma Action Plan: *Attach any Action Plan to the IHP for use in an emergency.* *Note which healthcare professional issued the plan, their role and the date issued.*	
Issued by:	**Date**:
Care Plan: *Note where any relevant care plan can be found.* *Note what staff are responsible for delivering / supporting delivery of the care plan.* *Note which healthcare professional issued the plan, their role and the date issued.*	
Date:	**Date**:

APPENDIX 2: Allergy Risk Assessment Template

Information	Details
Name	
School	
Relevant Allergy	

Activity

Activity	Date

Risks Identified

Hazard	Risk Level	Control Measure

Medication Arrangements

Requirement	Confirmation
Medication available	
Trained staff identified	
Emergency contacts available	
Venue informed	

Completed by: _____

Date: _____

APPENDIX 3: Allergy Report Form

Incident Information

Detail	Information
Date	
Time	
Location	
Pupil	

Incident Description

Describe what happened:

Symptoms Observed

☐ Rash

☐ Swelling

☐ Difficulty breathing

☐ Vomiting

☐ Wheezing

☐ Loss of consciousness

☐ Other

Details:

Action Taken

☐ Antihistamine given

☐ AAI administered

☐ Ambulance called

☐ Parents contacted

☐ Hospital attendance required

Outcome

Completed by:

APPENDIX 4: Allergy Near Miss Reporting Form

A near miss is any incident where exposure occurred or could have occurred but did not result in harm.

Details

Date: _____

Location: _____

Pupil(s) involved: _____

Description:

Immediate Actions Taken

Root Cause Identified

☐ Labelling issue

☐ Communication issue

☐ Supervision issue

☐ Catering issue

☐ Human error

☐ Other

Actions to Prevent Recurrence

Reviewed by Allergy Lead:

APPENDIX 5: Annual School Allergy Compliance Audit

Requirement	Yes	No	Action Required
Allergy Policy published	☐	☐	
Allergy Lead identified	☐	☐	
Staff training completed	☐	☐	
IHPs in place	☐	☐	
AAI checks completed monthly	☐	☐	
Spare AAIs available	☐	☐	
Incident records maintained	☐	☐	
Near miss records maintained	☐	☐	
Educational visit procedures compliant	☐	☐	
Emergency kit available	☐	☐	

Overall RAG Rating:

🟢 Green

🟠 Amber

🔴 Red

Headteacher Signature: _____

Date: _____

APPENDIX 6: Staff Allergy

Staff Allergy Training Record

Name	Role	Date Trained	Anaphylaxis Awareness	AAI Administration	Trainer
			☐	☐	
			☐	☐	
			☐	☐	
			☐	☐	
			☐	☐	
			☐	☐	
			☐	☐	

Training should be refreshed annually.

APPENDIX 7: Adrenaline Auto-Injector Monthly Check Log

Date	Device Type	Batch Number	Expiry Date	Checked By	Action Required

Monthly checks must confirm:

☐ Device present

☐ Device undamaged

☐ Solution clear

☐ Expiry date appropriate

☐ Replacement ordered if required

APPENDIX 8: Emergency Anaphylaxis Response Flowchart

Suspected Anaphylaxis

Symptoms may include:

- Difficulty breathing
- Persistent cough
- Swollen tongue
- Swollen throat
- Difficulty swallowing
- Hoarse voice
- Dizziness
- Collapse
- Loss of consciousness

Immediate Action

Step 1

Administer AAI immediately.

Do not delay.

Step 2

Call 999.

State:

"ANAPHYLAXIS – CHILD REQUIRES EMERGENCY AMBULANCE"

Step 3

Contact parents/carers.

Step 4

Lay pupil flat or allow comfortable breathing position.

Do not allow pupil to walk around.

Step 5

If symptoms continue and another AAI is available, administer second dose following current medical guidance.

Step 6

Send all used devices with ambulance crew.

Step 7

Complete school incident report and review procedures.