



Allergy Safety Policy

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1.0	September 2026	Lauren English	Approved	Original document that has been localised.
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Annually		FGB		September 2027

1. Policy Statement

At Buryfields Infant School we are committed to providing a safe, inclusive, and supportive environment for all pupils, staff, visitors, and members of the wider school community who have allergies. We recognise that allergies can have a significant impact on health, wellbeing, attendance, and participation in education.

This policy sets out the measures the school will take to minimise the risk of exposure to allergens, ensure effective emergency responses, and support the physical and emotional wellbeing of individuals with allergies.

This policy complies with the requirements of Section 34 of the Children's Wellbeing and Schools Act 2026 and should be read and used alongside the school's:

- Supporting Pupils with Medical Conditions Policy,
- First Aid Policy,
- Health and Safety Policy,
- Safeguarding Policy, Behaviour and Anti-Bullying Policies, and
- Data Protection Policy.

2. Roles and responsibilities

Headteacher

The headteacher has overall responsibility for implementing this policy and ensuring that appropriate systems are in place to safeguard pupils with allergies.

Named senior leader for allergy safety

The designated Allergy Safety Lead is:

Name: Lauren English

Role: Headteacher

The Allergy Safety Lead will:

- Oversee the implementation of this policy.
- Maintain oversight of allergy records and Individual Healthcare Plans (IHPs).
- Ensure staff training is completed and recorded.
- Monitor allergy-related incidents and near misses.
- Lead annual reviews of the policy.
- Liaise with parents, healthcare professionals, and external agencies where required.
- Ensure that risks relating to pupils with allergy are included on the setting's relevant risk registers.

Staff

All staff are responsible for:

- Following this policy and associated procedures.
- Attending annual allergy awareness and emergency response training.
- Familiarising themselves with pupils' allergy needs and care plans where relevant.
- Responding appropriately in an emergency.
- Reporting allergy incidents and near misses.

Parents and carers

Parents and carers are responsible for:

- Informing the school of any diagnosed allergy.
- Providing up-to-date medical information and prescribed medication, clearly labelled.
- Supplying Allergy and /or Asthma Action Plans where applicable.
- Ensuring prescribed medication remains in date.
- Informing the school of any changes in medical circumstances.

Pupils

Where age and understanding permit, pupils are encouraged to:

- Take an active role in managing their allergies.
- Inform staff if they feel unwell or believe they have been exposed to an allergen.
- Carry prescribed medication where agreed and appropriate.
- Avoid sharing food.

3. Definitions

Allergy is a medical condition in which the body's immune system has an abnormal reaction to normally harmless substances such as food, insect stings, contact allergens and airborne allergens.

Anaphylaxis is a potentially fatal reaction affecting the Airway/Breathing/Circulation ("ABC"). Many individuals with allergies to food or insect stings are at risk of anaphylaxis.

Asthma is a lung disease caused by inflammation and tightening of the airways, it is frequently associated with allergy and anaphylaxis, because exposure to allergens can provoke an asthma attack, a potentially life-threatening condition.

Intolerance to foods or ingredients that the body is unable to digest is different to allergy and does not cause a serious allergic reaction. It can cause long term health problems if not avoided. Common food intolerances include lactose and gluten. Coeliac disease is a lifelong autoimmune condition to gluten, found in rye, barley and wheat.

4. Creating an allergy-aware culture

Allergy awareness training

All school staff present during times when pupils are on site will receive annual allergy awareness and emergency response training.

This includes, but is not limited to:

- teaching staff
- teaching assistants
- administrative staff
- catering staff
- caretaker
- after-school club staff
- agency and supply staff
- regular volunteers

Staff will have their training provided by the school; staff employed by contractors such as our catering and wraparound care providers will have their training provided by their employer.

Annual allergy awareness and emergency response training will be delivered by a suitably qualified provider such as approved online training providers, or other competent healthcare professionals. Practical training in the use of prescribed and spare adrenaline auto-injectors will form part of annual refresher training; trainer devices of Epipens are used as part of our training.

The Allergy Safety Lead will ensure that annual training has been completed for all staff not employed directly by the school who work regularly with pupils.

New staff will receive allergy awareness and emergency response training as part of their induction, in line with other safeguarding training requirements.

Supply staff and temporary workers will be provided with information regarding pupils with severe allergies and emergency procedures before commencing duties.

Staff will also be informed where allergy information, Individual Healthcare Plans (IHPs), Allergy Action Plans, Asthma Action Plans and emergency procedures are stored and how these can be accessed quickly during normal school activities and emergency situations.

Annual training will cover, and ensure staff understand:

- What allergies are and the risks they present.
- The relationship between food allergy, asthma, eczema, hay fever, and other allergic conditions.
- The difference between food allergy, food intolerance, and coeliac disease.
- Known allergens within the school environment and where information on allergy triggers can be found.
- Symptoms of allergic reactions.
- The signs and symptoms of anaphylaxis.
- How to respond in an emergency:
 - How to contact emergency services and inform parents.
 - How to locate and administer adrenaline auto-injectors (ADs/AAls).
 - How to locate and administer emergency asthma medication where required.
 - How to access Allergy Action Plans and Individual Healthcare Plans.
- Their role in reducing allergen exposure.
- Procedures for reporting incidents and near misses.

Training records will be maintained by the Allergy Safety Lead.

5. Supporting wellbeing

The school recognises that living with allergies can contribute to anxiety and emotional distress.

We will:

- Foster an inclusive and supportive environment.
- Promote pupil confidence and independence in managing allergies.
- Support pupils who are able to self-manage their allergy with supervision as appropriate.
- Ensure pupils with allergies can participate fully in school life.
- Provide appropriate pastoral support where needed.
- Work closely with parents and carers to address concerns.
- Promote understanding of allergies through age-appropriate education.

Bullying and Discrimination

Bullying, teasing, intimidation, or exclusion relating to a pupil's allergy or medical condition will not be tolerated.

Any incidents will be managed in accordance with the school's Behaviour Policy.

6. Minimising risk

We will take reasonable measures to reduce the likelihood of exposure to known allergens.

Measures include:

- Maintaining accurate allergy records.
- Informing relevant staff of allergy risks.
- Considering allergy risks during lesson planning and special events.
- Promoting good hygiene practices, including handwashing.
- Cleaning eating areas appropriately, and in line with guidance.
- Conducting individual risk assessments where necessary.

Curriculum activities

Staff planning activities involving food, animals, science experiments, art materials, cooking ingredients or other potential allergens will consider allergy risks beforehand, for example the use of cereal packets in junk modelling.

Suitable alternatives and reasonable adjustments will be provided where appropriate to ensure pupils are not excluded.

Airborne and Contact Allergens

The school recognises that not all allergies are food related. Where a pupil has a known allergy to airborne or contact allergens, such as pollen, animal dander, dust mites, latex, fragrances, chemicals or other environmental allergens, the school will implement reasonable measures to minimise exposure.

These measures will consider:

- Adjustments to classroom seating arrangements.
- Restrictions on the use of specific products or materials.
- Enhanced cleaning arrangements.
- Consideration of allergens during curriculum activities.
- Additional supervision or risk management measures where necessary.

Any specific arrangements required will be recorded within the pupil's Individual Healthcare Plan and supported by individual risk assessments where appropriate.

7. Food allergy management

The school will work closely with our catering provider and families to manage food allergy risks.

We will:

- Seek accurate allergen information from catering providers.
- Ensure pupils and families can access relevant allergen information.
- Encourage pupils not to share food or drinks.
- Communicate clearly regarding food-related school events.
- Assess risks associated with food brought into school.
- Employ at least two methods of identifying pupils with a known allergy at mealtimes, for example photographs displayed in staff-only areas and adult verification procedures.

School leaders will undertake suitable risk assessments and management arrangements for food brought onto the premises by pupils, staff, visitors and parents. Particular consideration will be given to celebrations, fundraising events, food technology lessons, cultural events, educational visits and any activity involving the preparation or sharing of food.

The school cannot guarantee an allergen-free environment but will take reasonable steps to minimise risk.

8. Identification and record keeping

We will maintain an up-to-date register of pupils with known allergies and, where voluntarily disclosed and necessary to support health and safety arrangements, records of staff and regular visitors with severe allergies.

Information regarding allergies will be collected:

- During admission processes
- Through annual medical information updates issued to all parents at the start of each academic year.
- Through Individual Healthcare Plan reviews.

Following notification from parents or healthcare professionals of any change in a pupil's medical condition.

Records will include:

- Pupils with allergies and the severity of reactions.
- Their known allergens.
- Prescribed medications and the location of their medication.
- Individual Healthcare Plans.
- Allergy Action Plans.
- Asthma Action Plans where relevant.
- Emergency contacts.

Information will be obtained from:

- Parents and carers.
- Healthcare professionals.
- Previous educational settings.
- Admission documentation.

All records will be reviewed at least annually by the Allergy Safety Lead and updated whenever circumstances change. The allergy register, associated Allergy Action Plans, Asthma Action Plans and Individual Healthcare Plans will be formally reviewed with parents and carers at least annually and whenever there is a significant change in medical advice, diagnosis or treatment.

9. Individual Healthcare Plans (IHPs)

An Individual Healthcare Plan will be developed for pupils where:

- Their allergy has a functional impact within the school environment.
- They are at risk of harm because of their allergy and they require arrangements that are additional to or different from those provided generally.

IHPs will set out:

- The pupil's allergy and known triggers.
- Symptoms requiring action.
- Preventative measures.
- Medication arrangements, including storage.
- Any reasonable adjustments required.
- Emergency procedures.
- Staff responsibilities.
- Educational visits arrangements.
- How the pupil's wellbeing will be supported, including how they will be supported to participate fully in school life.

Where provided, Allergy Action Plans and Asthma Action Plans will be attached to or referenced within the IHP.

Plans will be reviewed at least annually and following any significant reaction, or following changes to treatment or diagnosis.

10. Prescribed Adrenaline Devices (ADs) or Auto-Injectors (AIs)

Pupils prescribed ADs/AIs will have rapid access to their medication at all times. The school will ensure that pupils prescribed adrenaline devices are never more than five minutes from access to those devices during the school day, on educational visits and during extracurricular activities.

This includes enabling rapid access:

- In classrooms.
- During break and lunch periods.
- On the field and in the woodland area.
- During educational visits.
- During extracurricular activities.

Medication storage locations will be known to all relevant staff and clearly identified. The ADs/AIs will be located in the child's classroom and clearly labelled

The school will maintain records of:

- Pupils prescribed ADs/AAls.
- The location of devices.
- Expiry dates.
- Relevant Action Plans.

Parents remain responsible for ensuring prescribed devices are supplied and replaced before expiry. Parents are encouraged to sign up for expiry date reminders on the device manufacturer website.

We strongly encourage pupils to keep their Ads/AAls in school and have a separate set kept at home. Where pupils do routinely take prescribed ADs/AAls between home and school, parents and carers remain responsible for ensuring the devices accompany the pupil each day and remain in date. They should be handed to the class teacher in the morning.

The school will undertake termly checks of recorded expiry dates and notify parents and carers when replacement medication is required.

11. Spare Adrenaline Auto-Injectors

The school will order ADs/AAls and emergency asthma inhalers from a registered pharmaceutical supplier.

We will maintain suitably located spare ADs/AAls where permitted and appropriate.

Storage

Spare ADs/AAls will:

- Be clearly labelled as emergency stock, with their strengths easily visible
- Be stored in pairs.
- Be easily accessible.
- Never be locked away.
- Be stored at room temperature, away from extremes of heat and direct sunlight.
- Be located so that emergency medication can reach a pupil within five minutes.

The school will organise the storage of prescribed and spare adrenaline devices so that no pupil at risk of anaphylaxis is more than five minutes from access to adrenaline at any point during the school day. Where required, additional emergency kits will be located in strategic areas of the school site to support this requirement.

The ADs/AAls will be located in Rowan Room and clearly labelled.

Monitoring

The school will maintain a listed record of all devices and their location, and

- Check expiry dates termly.
- Replace expired devices promptly.
- Replace devices promptly following use.
- Dispose of used devices safely in accordance with medical waste requirements.

Spare emergency kits may/will include:

- Spare AAls.
- Emergency asthma reliever inhaler.
- Spacers to support inhaler intake.
- Instructions for use.

‘Spare’ Asthma Inhalers

- Emergency asthma inhalers will only be given to pupils who have been prescribed an inhaler when their own inhaler is not available and where written parental and carer consent has been obtained to do so. These are kept in the medical cupboard in Rowan Room.

12. Educational visits and off-site activities

Pupils with allergies will be fully included in educational visits.

Risk assessments will be undertaken ahead of a planned trip and include consideration of:

- Itinerary and venue risks.
- Known allergens.
- Food arrangements.
- Access to emergency medication.
- Staff trained in emergency response.
- Emergency medical services available at the destination.
- Availability of a mobile phone signal.
- Contingency arrangements in the event of allergen exposure.

All staff and supporting adults on the trip will be briefed about the known allergen risks of pupils.

Pupils at risk of anaphylaxis will have access to their prescribed AD/AAI throughout the visit, by holding it themselves or it being held by a designated member of staff, identified in the risk assessment.

13. Responding to allergic reactions

In the event of an allergic reaction:

1. A member of staff will assess the situation immediately and remain with the pupil.
2. If there is an Action Plan in place, the emergency procedures outlined within it will be followed.
3. Adrenaline will be administered without delay where anaphylaxis is suspected.
4. Emergency services will be called.
5. Parents or carers will be informed as soon as possible.
6. The incident will be recorded and reviewed.

Where there is any doubt, staff will treat a suspected anaphylactic reaction as a medical emergency, including where a pupil with no known allergy presents with symptoms consistent with anaphylaxis.

- Staff will immediately call 999.
- A trained member of staff may administer a spare AD/AAI where permitted and clinically indicated.
- Parents and carers will be informed immediately.
- The incident will be investigated and appropriate medical follow-up encouraged.

14. Reporting serious incidents and near misses

All allergy-related incidents and near misses will be reported on the same day and, wherever possible, within two hours of the incident.

The report will include:

- Date and time.
- Individuals involved.
- Circumstances of exposure.
- Actions taken.
- Outcomes.
- Lessons learned.
- Parents will be informed.
- Risk assessments and procedures will be updated as necessary.

The Allergy Safety Lead will review incidents to identify improvements and reduce future risks, at least on a termly basis. Trends arising from incidents and near misses will be analysed and reported to senior leaders and governors as appropriate.

Lessons learned will be used to inform future policy reviews, staff training, risk assessments and wider allergy safety arrangements across the school.

The school encourages parents and carers to report incidents occurring outside school that may be relevant to a pupil's safety within school.

15. Information sharing and confidentiality

The school will manage allergy information in accordance with UK GDPR and Data Protection legislation.

Information will only be shared on a need-to-know basis to protect a pupil's health and safety.

Relevant staff will have access to:

- Individual Healthcare Plans.
- Allergy Action Plans.
- Emergency procedures.

Information will be handled sensitively and respectfully at all times.

16. Raising awareness

This policy will be:

- Published on the school website.
- Available in hard copy on request.
- Included within staff induction processes.
- Referenced during annual allergy awareness training.

The school will promote age-appropriate allergy awareness amongst pupils and within its curriculum to help create a supportive and inclusive environment.

Where appropriate and agreed with parents and carers, peers may be taught how to seek help quickly if a pupil experiences an allergic reaction.

17. Monitoring and review

This policy will be reviewed annually by the Allergy Safety Lead and Governing Body, or sooner following:

- A serious allergic reaction.
- An anaphylaxis incident.
- A significant near miss.
- Changes in legislation or statutory guidance.
- Changes to school arrangements.

Appendix 1 – Useful Resources and Guidance

[Supporting pupils with medical conditions at school - GOV.UK](#)

[Allergy Safety in Schools statutory guidance](#)

[Government Allergy Safety Policy template](#)

[Individual Healthcare Plan for allergy template \(Gov.UK\)](#)

[Template to order adrenaline auto-injectors from a pharmaceutical supplier](#)