



*‘Working together to achieve our best in a  
safe, nurturing environment’*

## Pupil Allergy Policy

|                            |                |                        |
|----------------------------|----------------|------------------------|
| <b>Approved by:</b>        | Governing Body | <b>Date:</b> July 2026 |
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### 1. Aims

Beever Primary School recognises that a number of community members (pupils, parents, visitors and staff) may suffer from potentially life-threatening allergies or intolerances to certain foods.

Beever Primary School is committed to a whole school approach to the care and management of those members of the School community. This policy looks at food allergy and intolerances in particular.

The school's position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure by hazard identification, instruction and information. This will encourage self-responsibility to all those with known allergens to make informed decisions on food choices. It is also important that the school has robust plans for an effective response to possible emergencies.

Our school is committed to proactive risk food allergy management through:

- The encouragement of self-responsibility and learned avoidance strategies amongst those suffering from allergies.
- The establishment and documentation of a comprehensive management plan for menu planning, food labelling, stores and stock ordering and customer awareness of food produced on site.
- Provision of a staff awareness programme on food allergies/intolerances, possible symptoms (anaphylaxis) recognition and treatment.
- Being a 'Nut Aware' school

The aim of this policy is to minimise the risk of any person suffering allergy-induced anaphylaxis, or food intolerance whilst at Beever Primary School or attending any school related activity. The policy sets out guidance for staff to ensure they are properly prepared to manage such emergency situations should they arise. It is also intended to outline how information can be accessed to food allergens in the School Kitchen facilities.

### 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

The common causes of allergies relevant to this policy are the 14 major food allergens:

- Cereals containing Gluten
- Celery including stalks, leaves, seeds and celeriac in salads
- Crustaceans, (prawns, crab, lobster, scampi, shrimp paste)
- Eggs - also food glazed with egg
- Fish - some salad dressings, relishes, fish sauce, some soy and Worcester sauces
- Soya (tofu, bean curd, soya flour)
- Milk - also food glazed with milk
- Nuts, (almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew and macadamia (Queensland) nuts, nut oils, marzipan)
- Peanuts - sauces, cakes, desserts, ground nut oil, peanut flour
- Mustard - liquid mustard, mustard powder, mustard seeds
- Sesame Seeds - bread, bread sticks, tahini, houmous, sesame oil
- Sulphur dioxide/Sulphites (dried fruit, fruit juice drinks, wine, beer)
- Lupin, seeds and flour, in some bread and pastries
- Molluscs, (mussels, whelks, oyster sauce, land snails and squid)

The allergy to nuts is the most common high risk allergy and, as such, demands more rigorous controls. However, it is important to ensure that all allergies and intolerances are treated equally as the effect to the individual can be both life-threatening and uncomfortable, if suffered.

### 2.1 Definitions

|                          |                                                                                                                                                                                                                                                         |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Allergy</b>           | A condition in which the body has an exaggerated response to a substance (e.g. food or drug), also known as hypersensitivity.                                                                                                                           |
| <b>Allergen</b>          | A normally harmless substance, that triggers an allergic reaction in the immune system of a susceptible person.                                                                                                                                         |
| <b>Anaphylaxis</b>       | Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to a trigger (food, stings, bites, or medicines).                                                                                            |
| <b>Adrenaline device</b> | A syringe style device containing the drug adrenaline. This is an individual prescribed drug for known sufferers which is ready for immediate intramuscular administration. This may also be referred to as an Epi-Pen/ Adrenaline Auto-Injector (AAI). |

### 3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

#### 3.1 Allergy lead

The nominated allergy lead is Mrs Victoria Kindon, Deputy Headteacher.

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 the administrative staff)
- Ensuring:
  - All allergy information is up to date and readily available to relevant members of staff
  - All pupils with allergies have an allergy action plan completed by a medical professional
  - All staff receive an appropriate level of allergy training
  - All staff are aware of the school's policy and procedures regarding allergies
  - Relevant staff are aware of what activities need an allergy risk assessment
- Regularly reviewing and updating the allergy policy

### **3.2 School administration**

The school administration staff are responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAls are in date
- Any other appropriate tasks delegated by the allergy lead

### **3.3 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
- Ensuring adrenaline auto-injectors are taken everywhere with the children (hall, playground etc) and only used for their intended purpose

### **3.4 The Catering Staff**

All catering staff are responsible for:

- Using only authorised suppliers and being the controlling point and contact for all purchases of food stuffs for school catering
- Ensuring suppliers of all foods and catering suppliers are aware of the School's Food Allergy policy and the requirements under the labelling law

- Ensuring suppliers of food stuffs are nut free or labelled 'may contain nuts'
- Being aware of pupils and staff who have such food allergies and updating this training every three years
- Clear labelling of items of food stuffs that may contain nuts

### **3.5 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

### **3.6 Pupils with allergies**

These pupils are responsible for:

- Being aware of their allergens and the risks they pose

### **3.7 Pupils without allergies**

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers

## **4. 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

## **5. Managing risk**

### **5.1 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

### **5.2 Catering**

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view
- 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

### **5.3 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.

### **5.4 Insect bites/stings**

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

### **5.5 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

## 5.6 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher

## 5.7 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
- Staff must check the requirements of all pupils they are taking off site. This is part of the offsite risk assessment. All pupils' dietary information is on SIMs. Where food intolerance has been identified, this must be relayed to the School Kitchen if they are ordering packed lunches or any foods for in-house events from our catering suppliers
- Staff must ensure two auto-injectors are taken on off-site visits for those children who have them prescribed

If the school hosts any 'coffee mornings' or fundraisers for charity etc, it is important that no food poses a risk to the end user, however, this is difficult for the school kitchen to monitor. Where products are not made on site, but provided/sold by the school, appropriate signage should be in place. This will state the following:

**'This item was not produced at Beever Primary School therefore we cannot guarantee that it does not contain nuts or any other allergen'.**

External companies supplying food for clubs should have allergy aware and food safety trained staff preparing and serving the food and there should be allergen matrices in place for the food served.

A check will be made by staff on specific dietary information available for the children with allergies and intolerances participating to ensure that checks can be made prior to serving.

All products should be plated separately, and stored as such (wrapped where possible) to prevent cross contamination to other items.

It should be left to the discretion of the person consuming/buying the food that they accept the risk that allergens may be present.

## 6. Procedures for handling an allergic reaction

### 6.1 Register of pupils with AAI

- The school maintains records 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 record 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

➤ The record is kept in the staffroom, classroom and school kitchen and can be checked quickly by any member of staff as part of initiating an emergency response

Pupils keep their AAIs with them at all times when moving around the school- these are kept in a bag with the child's name on and contain their record sheet.

## 6.2 Allergic reaction procedures

- As part of the whole-school awareness approach 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 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
- 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. Regulation 238 of the [Human Medicines Regulations 2012](#), provides a legal exemption allowing anyone to administer specific, life-saving prescription-only medicines (such as adrenaline) in an emergency to save a life, without requiring a doctor's prescription. Benedict's Law (also known as the Schools [Allergy Safety] Bill) is UK legislation that mandates strict allergy safety protections in all schools in England. It requires schools to have comprehensive allergy policies, staff training, spare emergency adrenaline auto-injectors (AAIs), and individual healthcare plans for pupils.

**Recognise the Signs of Anaphylaxis...**

| A Airways                                                                                                                                               | B Breathing                                                                                                            | C Circulation                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• Persistent cough</li> <li>• Hoarse voice</li> <li>• Difficulty swallowing</li> <li>• Swollen tongue</li> </ul> | <ul style="list-style-type: none"> <li>• Difficult or noisy breathing</li> <li>• Wheeze or persistent cough</li> </ul> | <ul style="list-style-type: none"> <li>• Persistent dizziness</li> <li>• Pale or floppy</li> <li>• Suddenly sleepy</li> <li>• Collapse/unconscious</li> </ul> |

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening. Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

**ANAPHYLAXIS: ACTIONS TO TAKE**

If any one or more of the above ABC symptoms are present, take these steps.

**1. Administer an Adrenaline Auto Injector (AAI) without delay**

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, give the AAI, it will not harm them.



**2. Dial 999 and say anaphylaxis ('ana-fill-axis')**

Stay with the person until the ambulance arrives. DO NOT let them stand up and walk around.



**3. The person should lie down immediately**

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.



**4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes**

If there is no sign of life, start CPR immediately until help arrives.

- 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

## **7. Adrenaline auto-injectors (AAIs)**

### **7.1 Purchasing of spare AAIs**

The allergy lead and Headteacher are responsible for buying AAIs and ensuring they are stored according to the guidance.

The school will obtain Adrenaline Auto-Injectors (AAIs) from a local pharmacy or reputable licensed supplier and will ensure that an adequate quantity of AAIs are available on site at all times. To avoid confusion during an emergency, the school will purchase a single, consistent brand of AAI, selected in line with clinical guidance and staff training requirements. The dosage of each AAI will follow the Resuscitation Council UK's age-based criteria as outlined on page 11 of [the guidance](#))

- For children aged under 6 years: a dose of 150 microgram (0.15 milligram) of adrenaline is used (e.g. using an Epipen Junior (0.15mg), Emerade 150 or Jext 150 microgram device).
- For adults and children aged 6 + years: a dose of 300 microgram (0.3 milligram) of adrenaline is used (e.g. using an Epipen (0.3mg), Emerade 300 or Jext 300 microgram device).

All AAIs will be checked regularly to ensure they remain in date, accessible, and ready for use, with monthly monitoring recorded and any devices approaching expiry replaced promptly. Staff will follow recommended use guidelines, including administering the AAI immediately at the onset of anaphylaxis symptoms, calling emergency services, and giving a second dose after five minutes if symptoms persist, in line with national clinical guidance. Expired AAIs will be removed from circulation and disposed of safely through the local pharmacy.

### **7.2 Storage of 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
- AAIs will be clearly labelled with a child's name and stored in a bag with their name on also
- Spare (emergency) AAIs will be stored in the conference room

### **7.3 Maintenance of AAIs**

The allergy lead and school administrators are responsible for checking that:

- The AAIs are present and in date
- Replacement AAIs are obtained from parents/carers when the expiry date is near

### **7.4 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.

### **7.5 Use of AAI's off school premises**

- School will conduct a risk-assessment for any pupil at risk of anaphylaxis taking part in a school trip off school premises and this will be included within the visit risk assessment.
- School will take spare AAI(s) obtained for emergency use on off-site trips.

### **7.6 Emergency anaphylaxis kit**

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry dates will be logged on Medical Tracker together with a reminder set regarding the arrangements for replacing injectors
- A record of when AAIs have been administered will be logged on Medical Tracker

## **8. Training**

The school 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
- Training will be carried out annually by the school nurse.

## **9. 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