



**Tilston Parochial
CE Primary Academy**

Allergen Management Policy

This policy was approved by the Trust Board on **[INSERT DATE]**

Chair of Trustees: Nayland Southorn

This policy was adopted by the academy on 30.9.2026

This policy will be reviewed annually on or before September 2027 if there are any legislative changes.

Purpose

- Set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction.
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion.
- Promote and maintain allergy awareness among the school community.

Background

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to):

Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander

Legislation and Guidance

Schools operated by North West Academies Trust have a legal duty to support pupils with medical conditions, including allergy. Schools must adhere to legislation and statutory guidance on caring for pupils with medical conditions, including the administration of allergy medication and adrenaline auto-injectors (AAIs).

This policy is based on the Department for Education's guidance on [allergies in schools](#), [allergy safety 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 and guidance:

- Children and Families Act 2014
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)

Detail has also been sourced from Allergy UK, a national charity which provides information to help people who live with allergies - <https://www.allergyuk.org/>.

Policy Monitoring and Review

This policy will be reviewed at least annually by the Headteacher and Allergy Safety Lead.

An earlier review will be undertaken following:

- A serious allergic reaction or anaphylaxis event.
- A significant allergy-related near miss.
- Changes to legislation or statutory guidance.
- Findings from monitoring, audits or investigations which identify improvements that should be made.

The review process will consider feedback from staff, pupils, parents/carers and healthcare professionals where appropriate.

This policy will be published on the academy website and made readily available to parents, carers, staff and other interested parties.

Roles and Responsibilities

Allergy Safety Lead

The Headteacher will appoint a named member of the Senior Leadership Team to act as the school's Allergy Safety Lead.

The Allergy Safety Lead for Tilston Primary CE Academy is Mrs Kelsey Mort (Headteacher)

The Allergy Safety Lead will be responsible for:

- Overseeing implementation of this policy and ensuring compliance with statutory requirements.
- Maintaining oversight of allergy management arrangements across the school.
- Ensuring that staff receive appropriate allergy and anaphylaxis training.
- Monitoring and reviewing allergy incidents, allergic reactions and near misses.
- Coordinating communication between school staff, parents/carers, healthcare professionals and catering providers where appropriate.
- Ensuring individual Allergy Action Plans and associated risk assessments remain up to date.
- Monitoring the availability and management of emergency medication, including spare adrenaline auto-injectors.
- Leading the annual review of this policy and any required updates following incidents or changes in guidance.

Parent Responsibilities

Parents 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 children 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.

Staff Responsibilities

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.

Pupil Responsibilities

All pupils with allergies 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 (designated members of staff are still expected to help administer the AAI if the pupil is not able to do so).

All pupils without allergies are responsible for:

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

The school will ensure that relevant allergy information is communicated to staff on a need-to-know basis whilst maintaining pupil confidentiality. Information will be updated promptly when notified of any changes in a pupil's allergy status, medication or care needs.

Allergy Action Plans

Allergy action plans are designed to function as part of individual healthcare plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline autoinjector.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.

Assessing Risk

Individual Healthcare Plans should be supported by an up-to-date Allergy Action Plan completed by an appropriate healthcare professional, to support the undertaking of a risk assessment(s) 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.

North West Academies Trust recommends using the Department for Education's Individual Healthcare Plan for Allergy template, to ensure continuity.

Managing Risk

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.

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 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.

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.

Insect Bites/Stings

When outdoors:

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

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.

Support for Mental Health

Pupils with allergies will have additional support through:

- Pastoral care.
- Regular check-ins with their class teacher/form tutor etc.

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.

Visitors, Contractors and External Providers

The school will take reasonable steps to ensure that visitors, contractors and external providers do not inadvertently place pupils with allergies at risk.

Where relevant, information regarding allergy risks and control measures will be communicated to:

- Visiting staff.
- External activity providers.
- Catering contractors.
- Educational visitors.
- Contractors undertaking work on site.

External providers involved in preparing or serving food, or delivering activities involving food, animals or other allergens, may be required to undertake a risk assessment before activities take place.

Staff

For any member of staff with a diagnosed allergy that places them at risk of anaphylaxis, the school will ensure that an appropriate Individual Healthcare Plan (IHP) is in place. The plan will provide clear guidance on the individual's allergens, signs and symptoms of an allergic reaction, emergency procedures, medication requirements, and the roles and responsibilities of those involved in responding to an incident.

Individual Healthcare Plans will be reviewed at least annually, or sooner where there is a change in the individual's medical condition, treatment, medication, or support needs. Regular review ensures that arrangements remain accurate, effective and responsive, helping to maintain a safe working environment and providing reassurance to affected staff members.

Relevant information relating to staff allergies will be shared with colleagues on a need-to-know basis to ensure an effective emergency response, whilst maintaining appropriate confidentiality. Where appropriate and proportionate, pupils may also be provided with age-appropriate information and guidance on how to seek help or alert a member of staff in the event of an allergic emergency. This will be communicated sensitively and in a manner that promotes awareness, understanding and the wellbeing of the member of staff concerned.

Inclusion, Equality and Anti-Bullying

The school is committed to ensuring that pupils with allergies can participate safely and fully in all aspects of school life.

The school recognises that pupils with allergies may be vulnerable to teasing, bullying, social exclusion or deliberate exposure to allergens.

Any behaviour which:

- Mocks a person's allergy.
- Excludes a pupil because of their allergy.
- Threatens a pupil using an allergen.
- Intentionally exposes a pupil to a known allergen.

Will be treated as a serious breach of the school's behaviour expectations and will be managed in accordance with the school's Behaviour and Anti-Bullying Policies.

The school will promote awareness, respect and understanding of allergies throughout the school community.

Unacceptable Practice

The school will avoid practices that unnecessarily exclude or disadvantage pupils with allergies.

This includes:

- Preventing pupils from attending trips or activities solely because of an allergy.
- Expecting parents to attend school trips to manage a pupil's allergy.
- Isolating pupils during lunch or break times solely because of an allergy.
- Discouraging participation in curriculum activities where reasonable adjustments can be made.
- Penalising pupils for absences related to their medical condition.
- Restricting access to prescribed medication.

The school will seek proportionate and reasonable measures to enable participation wherever possible.

Procedures for Handling an Allergic Reaction

Register of Pupils with AAI

The school maintains a register of pupils who have been prescribed AAI or where a doctor has provided a written plan recommending AAI to be used in the event of anaphylaxis. The register 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 register is stored on the school's Management Information System (Arbor), Medical Tracker, and in an easily accessible location (e.g. staff room) by designated member(s) of staff (e.g. class teachers) and can be checked quickly by any member of staff as part of initiating an emergency response.

The Allergy Safety Lead will review the allergy register at least termly to ensure records, photographs, medication details, Allergy Action Plans and Individual Healthcare Plans remain current.

Allergic Reaction Procedure

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.

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body.
- a tingling or itchy feeling in the mouth.
- swelling of lips, face or eyes.
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY – swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING – sudden onset wheezing, breathing difficulty, noisy breathing.
- CIRCULATION – dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the person has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways.
- It stops swelling.
- It raises the blood pressure.

As soon as anaphylaxis is suspected, adrenaline must be administered without delay.

Action:

- Keep the person where they are, call for help and do not leave them unattended.
- **LIE PERSON FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- **USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY** and note the time given. AAls should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.
- **CALL 999** and state **ANAPHYLAXIS (ana-fil-axis)**.
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer or next of kin as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment. If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent 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 informed.

Post-Incident Review

Following any incident involving the administration of an adrenaline auto-injector, the school will conduct a post-incident review.

The review may involve:

- The Allergy Safety Lead.
- Relevant members of staff.
- Parents/carers.
- Healthcare professionals where appropriate.

The purpose of the review is to:

- Establish the circumstances surrounding the incident.
- Identify strengths and weaknesses in the response.
- Update risk assessments and Allergy Action Plans if required.
- Determine whether further staff training or procedural changes are necessary.

The outcomes of the review will be documented and actions monitored to completion.

Recording and Reviewing Allergic Incidents and Near Misses

The school recognises the importance of learning from allergic incidents and situations which could have resulted in harm.

An allergy-related near miss may include:

- Accidental exposure to an allergen where no reaction occurred.
- Incorrect food being served or supplied.
- Failure to follow a pupil's Allergy Action Plan.
- Medication not being immediately available.
- Communication failures relating to allergy management.

All allergic reactions, administration of emergency medication, accidental allergen exposures and near misses will be recorded in accordance with the school's incident reporting procedures.

The Allergy Safety Lead will review all incidents and near misses to:

- Identify any underlying causes.
- Determine whether additional control measures are required.
- Update risk assessments where necessary.
- Inform future staff training.
- Reduce the likelihood of recurrence.

Findings will be shared with relevant staff and, where appropriate, parents/carers.

Supply, Storage and Care of Medication

Accessibility of Emergency Medication

The school will ensure that prescribed and spare adrenaline auto-injectors are stored in locations that allow them to be quickly accessed in an emergency.

The school aims to ensure that an adrenaline auto-injector can be retrieved and administered within five minutes of a suspected anaphylactic reaction being identified.

Staff will be made aware of the location of emergency medication and arrangements will be reviewed regularly to ensure prompt access throughout the school site.

Depending on their level of understanding and competence, pupils/staff/visitors will be encouraged to take responsibility for and to carry their own two AAI's on them at all times (in a suitable bag/container).

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept safely, not locked away and accessible to all staff.

Medication should be stored in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain:

- Two AAls i.e. EpiPen® or Jext® or Emerade®.
- An up-to-date allergy action plan and IHP.
- Antihistamine as tablets or syrup (if included on allergy action plan).
- Spoon if required.
- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the Business Manager will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Older Children and Medication

Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on very suddenly, so school staff need to be prepared to administer medication if the young person cannot.

Storage

AAls should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

AAls are single use only and must be disposed of as sharps. Used AAls can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a clinical waste contractor. The sharps bin is kept in the main office.

'Spare' Adrenaline Auto-Injectors

Tilston Parochial CE Primary Academy has purchased spare AAls for emergency use in children who are risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date).

These are stored in a cupboard in the main office, clearly labelled 'Emergency Anaphylaxis Adrenaline Pen', kept safely, not locked away and accessible and known to all staff.

Tilston Academy holds 2 spare pens which are kept in the following location/s:

Main Office

The Business Manager is responsible for checking the spare medication is in date on a monthly basis and to replace as needed.

Written parental permission for use of the spare AAls is included in the pupil's allergy action plan.

If anaphylaxis is suspected in an undiagnosed individual call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

The school menu is available for parents to view in weekly advance. All ingredients are available on request, and all allergens are highlighted at the school kitchen.

The Business Manager will inform the Edsential of pupils with food allergies.

Parents/carers are encouraged to meet with the Catering Manager/Cook to discuss their child's needs.

The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- If food is purchased from the school canteen/tuck shop, parents should check the appropriateness of foods by speaking directly to the catering manager.
- The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the catering manager.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

Please refer to Appendix 1 for roles and responsibilities to support the management of medical diets.

Training

The school is committed to ensuring that all staff understand their role in supporting pupils with allergies and responding effectively to allergy emergencies.

All staff who may be present during the school day will receive appropriate allergy awareness training. This includes:

- Teaching staff.
- Teaching assistants.
- Administrative staff.
- Lunchtime supervisors.
- Catering staff.
- Breakfast club and after-school club staff.
- Pastoral staff.
- First aiders.
- Regular volunteers.

Training will be provided as part of staff induction and refreshed at least annually.

Training will include:

- Understanding allergies and anaphylaxis.
- Recognising signs and symptoms of allergic reactions.
- Reducing the risk of allergen exposure.
- Understanding individual Allergy Action Plans.
- Administration of adrenaline auto-injectors.
- Emergency response procedures.
- Inclusion and wellbeing of pupils with allergies.
- Recording and reporting incidents and near misses.

Records of staff training will be maintained by the school.

Temporary, agency and supply staff will be provided with relevant allergy information, emergency procedures and details of pupils with serious allergies before commencing duties.

Appendix 1 – Roles and responsibilities for management of medical diets

	School	Parent	Caterer
Notification of allergy or intolerance	- Collect medical diet information of pupils in their school with food allergies and intolerances. - Share this information with the caterer. - Provide details of medical diets in advance of a new term with sufficient notice as per the caterer's policy. This will enable the caterer to fulfil their responsibilities outlined here. Failure to provide sufficient notice may result in a delay to medical diet provision.	- Inform the school of their child's food allergy/ intolerance prior to the beginning of the school term (or as soon as possible) after diagnosis or symptoms. - Provide a medical note to evidence the food allergy/intolerance. This must be from a qualified medical professional/medical establishment.*	Liaise with the school at the end of the preceding term to obtain information on those pupils with medical dietary requirements.
Communication	- Schools are the data controllers. - Keep allergen information up-to-date throughout the year and ensure the caterer always has the most up-to-date data. - Communication between parents and caterers must involve the school at every step. - Communication between stakeholders should be in writing and not just verbally provided.	- Ensure communication is with the school and not just the caterer throughout the process. - Provide schools with the information required in a timely manner and when requested. - Communication between stakeholders should be in writing and not just verbally provided.	- Ensure the school is kept up-to-date with medical diet menus and medical diet process. - Do not communicate with parents without involving the school. - Communication between stakeholders should be in writing and not just verbally provided.
Implementation & management of a medical diet	- Ensure the school has a method of identification when pupils following a confirmed medical diet come through the dining room, for example a medical diet lanyard. It is the school's responsibility to share this method with the caterer. Identification is essential for younger pupils. - The identification method should be a thorough process – for example, not solely down to teachers to identify the pupils, in case the teachers are absent. - Photos should not be the sole identification method. - Ensure all staff and lunchtime assistants are adequately trained on medical diets and allergen management. - Educate pupils about allergies and supporting their peers with medical diets.	- Approve medical diet menus when they are provided. - Provide a photo of child, if requested, to aid identification method.	- Ensure all team members are adequately trained on medical diets and allergen management. - Develop medical diet menus following an agreed process (i.e. company policy), where safe to do so - Ensure the medical diet menus are provided to the school and parents in a timely manner. - Ensure the information held on ingredients and recipes is accurate and regularly reviewed. - Meet the Food Information Regulations and future allergen legislation.