

RLT Allergens and Anaphylaxis Policy

Adopted: Spring Term 2026

Review period: Annually

Statutory: Yes

Required on website: Yes

Policy Document Version Control

Version 1

Responsibility for Policy:	Directors of Phase
Policy approval/date:	Spring term 2026
Frequency of Review:	Annual
Next Review date:	Spring term 2027
Related Policies:	Child Protection & Safeguarding Policy Supporting Children/students with Medical Conditions Policy First Aid Policy Health and Safety Policy Administering Medication Policy Emergency Procedures Policy Educational Visits / Trips Policy SEND Policy Equality & Accessibility Policy Behaviour Policy Trips and visits Antibullying Policy Data Protection / Privacy Policy
Minor Revisions:	Chris Bolton added information regarding Benedict's Law 14 th June 2026
Major changes	
Full re-write	This policy is new. It is an overarching RLT policy that ensures that our schools are compliant with all relevant related policies and current legislation. All processes will sit at school level.

1. Statement of Intent

The Rowan Learning Trust (RLT) is committed to ensuring that all children/students with allergies, including those at risk of anaphylaxis, are kept safe, fully included, and supported across every school in the trust. We recognise that allergies can vary in severity and that a consistent trust-wide system is essential in preventing reactions and responding effectively when they occur. This policy reflects emerging national statutory expectations for allergy safety in schools, including those introduced through the 2026 DfE guidance following Benedict's Law.

This policy sets out the trust's expectations for prevention, response, training, record-keeping, parental partnership, and safe operational practice.

The trust will take all reasonably practicable steps to minimise the risk of exposure to allergens and to ensure a safe environment for all children/students.

2. Legal Compliance

This Allergy & Anaphylaxis Policy is designed to meet and reflect all current statutory and regulatory requirements governing the management of medical needs, health and safety, and food allergen control in schools. The policy aligns with the following legislation and guidance:

- Children and Families Act 2014 – Section 100: Duty for schools and academies to make arrangements to support children/students with medical conditions, including allergies and anaphylaxis
- DfE Statutory Guidance: Supporting Children/students at School with Medical Conditions (2015): Issued under Section 100, setting mandatory expectations for Individual Healthcare Plans, staff training, medicine management, and emergency procedures
- Equality Act 2010 – Sections 20, 21 & 85: Duty to make reasonable adjustments and prevent discrimination for children/students whose allergies constitute a disability
- Health and Safety at Work etc. Act 1974 – Sections 2 & 3: Duties to protect employees and children/students through risk assessment, safe systems of work and trained staff
- Human Medicines (Amendment) Regulations 2017: Legal basis permitting schools to hold and administer spare adrenaline auto injectors
- Department of Health (2017) Guidance on the Use of AAls in Schools: National expectations for AAI access, storage, training, and emergency response
- Food Information Regulations 2014: Legal requirement to declare the 14 major allergens in all food served in schools
- Food Information (Amendment) (England) Regulations 2019 – Natasha's Law: Requires all Pre-Packed for Direct Sale (PPDS) food to include a full ingredients list with clearly emphasised allergens, applying to school

prepared sandwiches, baked goods, boxed salads and pre-packed trip lunches

- DfE statutory guidance (2026) on supporting children and young people with medical conditions and allergies (including reforms commonly referred to as 'Benedict's Law
- Management of Health and Safety at Work Regulations 1999: Requirement to assess risks to the health and safety of employees and others, including children/students, and to implement appropriate control measures

This policy ensures full compliance with all duties arising from these laws, including medical needs support, safe allergen management, risk assessment requirements, and mandatory PPDS labelling under Natasha's Law.

3. Purpose

The purpose of this policy is to provide a clear and consistent framework for managing allergies and anaphylaxis across the trust. It ensures that children/students with allergies can participate safely in all educational and wider school activities.

This policy aims to:

- ensure consistent management of allergies across all trust schools
- reduce the risk of exposure to allergens wherever reasonably practical
- equip staff to recognise allergic reactions and respond promptly
- meet legal and statutory duties, including the Children and Families Act 2014 and DfE medical conditions guidance

4. Scope

This policy applies to all trust schools, children/students, staff, volunteers, governors, contractors, and visitors. It also applies to all trust-led activities, including after-school clubs, wrap-around care, trips, sporting events, and residential.

All contractors, catering providers, external clubs, and third-party organisations operating on school sites or delivering activities must comply with this policy and relevant allergen legislation. Schools must ensure that appropriate allergen information is shared and that third parties have suitable risk control measures in place.

5. Definitions

For the purposes of this policy:

- allergy: An immune response to a normally harmless substance
- allergen: A substance capable of triggering an allergic reaction
- anaphylaxis: A severe, life-threatening allergic reaction affecting airway, breathing, or circulation
- AAI (Adrenaline Auto-Injector): A device for emergency treatment of anaphylaxis
- BSACI Allergy Action Plan: A medically authorised action plan used nationally

6. Trust-Level Responsibilities

The trust board has overall responsibility for ensuring adherence to this policy and for maintaining high standards of health, safety, and safeguarding across its schools.

The trust will:

- approve and review this policy annually
- monitor compliance through audits and reviews
- provide trust-wide templates (registers, risk assessments, consent forms)
- ensure appropriate training solutions (e.g Allergy Wise) are made available

The Trust will ensure clear lines of accountability for compliance. Schools are required to report on allergy management, training completion, and risk assessment implementation at least termly. Where concerns or non-compliance are identified, these will be escalated to the Trust executive team and Board. Appropriate remedial action will be required and monitored to ensure that statutory duties are consistently met across all schools.

7. School-Level Responsibilities

Assurance and Compliance

Schools are required to operate local procedures that translate this policy into practice, including systems for safe food provision, allergen management, and the inclusion of children/students with allergies in all off-site activities. Each school must be able to demonstrate compliance with this trust policy during scheduled audits and monitoring activities. Outcomes of monitoring will be reported to the trust Board as part of its oversight of safeguarding, health and safety.

Each headteacher is responsible for local implementation. They will ensure the safety and inclusion of children/students with allergies by adopting all expectations in this policy.

Schools must:

- appoint a named allergy lead (e.g. SENCO, school nurse, first aider)
- maintain accurate allergy registers and secure medical records
- ensure medication is stored safely and checked monthly
- train all staff annually in allergy and anaphylaxis management

- complete appropriate risk assessments for food-related activities and trips

8. Parent/Carer Responsibilities

Parents play a crucial role in keeping their children with allergies safe. They must work in partnership with the school and trust.

Parents must:

- provide accurate allergy information on admission
- supply an up-to-date BSACI Allergy Action Plan
- provide two in-date AAls and any other prescribed medication
- update the school immediately if circumstances change

9. Staff Responsibilities

All staff are responsible for ensuring the safety and inclusion of children/students with allergies and must be able to act swiftly in an emergency.

Staff must:

- complete annual trust-approved allergy and anaphylaxis training
- be aware of children/students with allergies and review their action plans
- know the location of AAls and how to use them
- follow all individual care plans and trust procedures
- ensure medication is taken on all trips and activities
- complete statutory allergy awareness and anaphylaxis training in line with national 2026 DfE guidance on supporting children and young people with medical conditions and allergies, ensuring competence in recognising symptoms and administering emergency treatment
- Training must include assessment of staff competence, including practical demonstration of recognising symptoms and administering an Adrenaline Auto-Injector (AAI). Schools must be able to evidence that staff are not only trained, but competent and confident to respond effectively in an emergency.

10. Pupil Responsibilities

Where age-appropriate, children/students with allergies should:

- tell an adult immediately if they feel unwell
- avoid sharing food or drinks
- carry their AAls if agreed with parents and clinicians (secondary phase)

11. Allergy Action Plans

Children and students whose allergy presents a risk of harm or requires arrangements additional to those generally available within the school must have an Individual Healthcare Plan (IHP). Where provided by a healthcare professional, Allergy Action Plans and Asthma Action Plans should be incorporated within, or attached to, the IHP and reviewed regularly.

Schools must ensure that:

- action plans are easily accessible in emergencies
- copies are stored in the medical room and electronically
- they are reviewed after any allergic reaction
- all children/students with allergies must have an Individual Healthcare Plan (IHP)
- incorporating a BSACI Allergy Action Plan, in line with statutory expectations

12. Educational Visits, off-Site Activities and Work Experience

The trust expects all schools to ensure that children/students with allergies, including those at risk of anaphylaxis, are safely included in all off-site activities. This applies to day visits, sporting fixtures, outdoor learning, residentials, alternative provision placements, and work experience. All schools must ensure that allergy-related needs are fully considered as part of visit planning and risk management.

Schools must take reasonable steps to assure themselves that external providers and venues have appropriate allergen management procedures in place. This includes confirmation of food safety controls, staff awareness, and emergency response arrangements proportionate to the level of risk.

safeguarding arrangements.

Headteachers must ensure that planning for off-site activities incorporates the allergy needs of individual children/students, aligns with statutory duties under the Children and Families Act 2014 and the Equality Act 2010, and complies with relevant national guidance, including the DfE's Health and Safety on Educational Visits (2018) and applicable OEAP National Guidance. Schools must be able to demonstrate that allergen considerations have been appropriately assessed and that suitable control measures are in place.

Schools must ensure that the medical and allergy information held for children/students remains central to decision-making for all off-site learning. This includes ensuring that relevant staff are aware of children/students' allergies, that information is shared appropriately with activity providers and venues, and that safe arrangements are in place throughout travel, activities and accommodation where applicable. Children/students must not be disadvantaged or excluded from visits where risks can be reasonably and safely managed.

Work experience and employer-based placements must meet the same expectations. Schools must ensure that employers are informed of relevant allergies and that placements are only approved when the environment, planned activities and supervision arrangements can safely accommodate the child/student's needs.

This policy requires all schools within the trust to maintain robust oversight of allergy-related considerations for off-site activities as part of their educational visits procedures. The trust will review compliance through its monitoring processes.

13. Emergency Treatment & Management of Anaphylaxis

Anaphylaxis can develop rapidly and requires immediate intervention. Staff must act without delay.

Signs of mild-moderate reaction include:

- hives or rash
- tingling or itching
- mild swelling of lips or face
- mild abdominal discomfort

Signs of anaphylaxis include:

- airway issues: swelling, hoarse voice, difficulty swallowing
- breathing issues: wheeze, shortness of breath
- circulation issues: dizziness, pale skin, collapse

Emergency protocol:

- administer AAI immediately
- call 999 stating 'anaphylaxis'
- lay the child/student flat with legs raised
- administer second AAI after 5 minutes, if symptoms persist
- monitor the child/student until ambulance arrives and do not move them

Children and students with both food allergy and asthma may be at increased risk during anaphylaxis. Where a child or student is known to have both conditions, staff should remain particularly vigilant if sudden breathing difficulties occur and should follow the individual's Allergy Action Plan and emergency procedures without delay.

14. Medication Storage & Spare AAls

Schools must store AAls in consistent, clearly labelled, accessible locations. Medication must be stored in a secure but immediately accessible location, known to all relevant staff, and never placed in a way that would delay access in an emergency.

ensure two AAls are available per child/student for those who require it

- purchase and maintain spare AAls as permitted
- conduct and record monthly checks
- ensure medication accompanies child/student during trips and visits
- ensure spare AAls are held on site in line with statutory guidance and are accessible at all times

15. Catering & Food Safety

The trust sets the expectation that all schools must operate fully compliant food and allergen management systems in line with the Food Information Regulations (2014) and Natasha's Law (PPDS, 2019). Schools must ensure that all food provision including on-site catering, curriculum activities involving food, events, and any food provided by external partners meets statutory allergen labelling requirements and robust cross-contamination controls. The trust monitors compliance annually across all schools through its quality assurance cycle.

Catering teams must comply with allergen labelling laws including the Food Information Regulations (2014) and Natasha's Law.

Schools must:

- ensure allergen information is clearly displayed
- identify children/students with allergies within dining areas
- prevent cross-contamination in food preparation
- risk assess curriculum and event-related food activities

Non-Food Allergens

The trust recognises that children/students may have serious allergies to substances other than food, including latex, adhesives, medications, insect stings, and materials used within the school environment. Schools must:

- identify any child/student with a non-food allergy on the allergy register
- ensure these allergens are controlled through risk assessment (e.g. use of non-latex gloves, avoidance of latex balloons, alternative classroom materials)
- ensure staff are briefed on the child/student's individual triggers
- include non-food allergens in curriculum, trip, classroom and equipment risk assessments
- ensure emergency medication for non-food allergens (e.g., AAls, inhalers, antihistamines) is always accessible

16. Educational Visits, Activities & Residential

All trust schools must ensure that children/students with allergies are fully included in off-site activities, educational visits and residential, in alignment with DfE "Health and Safety on Educational Visits" (2018) and national guidance. Each school is required to ensure that allergy considerations are embedded into visit planning and risk management, including safe access to medication, informed venue selection, and appropriate emergency readiness. The trust requires all schools to implement visit planning arrangements that reflect national standards and to evidence compliance through their local EVC systems.

Children/students with allergies must not be excluded from trips when risks can be safely managed.

Schools must:

- complete allergy-specific trip risk assessments
- take all required medication and action plans
- inform residential venues in advance

17. Allergy Awareness

The trust promotes allergy awareness as part of its safeguarding culture. In line with national guidance, blanket nut bans are not recommended. Instead, schools adopt a proportionate, educational approach.

18. Wellbeing, Inclusion and Anti-Bullying

The trust recognises that allergies can affect a child or student's emotional wellbeing, confidence and ability to participate fully in school life. Schools must promote a culture in which children and students with allergies feel safe, included and supported.

Schools must take reasonable steps to support the wellbeing of children and students with allergies, including providing reassurance regarding safety arrangements, promoting inclusion in educational and extracurricular activities, and addressing concerns raised by children, students and families. Children and students with allergies must not be unfairly excluded from activities, visits, clubs, residential experiences or school meals where risks can be reasonably managed.

Bullying, intimidation or deliberate exposure involving allergens will be treated seriously. Any behaviour intended to threaten, exclude, ridicule or place another person at risk because of their allergy must be managed through the school's Behaviour, Anti-Bullying and Safeguarding procedures.

19. Risk Assessment

Schools are required to complete:

- an annual whole-school allergy risk assessment

- individual risk assessments for each allergic child/student
- activity-specific assessments as required

The trust requires that all schools embed allergy-related considerations into their statutory risk-assessment frameworks, ensuring alignment with national guidance for educational visits, food provision, curriculum activities, and emergency response. Schools must ensure that their own local procedures reflect current sector guidance, including the Outdoor Education Advisers' Panel (OEAP) national guidance, when planning or approving off-site learning.

20. Monitoring, Review & Compliance

The trust will undertake annual audits of allergy management, training completion, and medication storage systems. Findings will be shared with the trust Board. The trust will review compliance with this policy annually by sampling school-level systems for allergy management, food safety, and visit planning. Findings will inform trust-wide training, support, and continuous improvement. The policy will be reviewed every year, or earlier if national statutory guidance from the DfE or Food Standards Agency changes.

The trust will ensure that monitoring activities evaluate compliance with the 2026 DfE statutory guidance on supporting children and young people with medical conditions and allergies. This will include assessing the implementation of whole-school allergy policies, staff training, availability of emergency medication, and the effectiveness of individual healthcare planning and incident management

Serious incidents will be recorded and reported in accordance with statutory requirements, including the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 where applicable.

All allergy-related incidents, including near misses, must be recorded in accordance with the school's incident reporting procedures. Schools must undertake a formal post-incident review following any allergic reaction requiring medication or emergency services involvement. This review must identify contributory factors, evaluate the effectiveness of control measures, and result in updated risk assessments and care plans where required.

21. Parental Consent

Written parental consent is required for all children/students with allergies. This includes consent for medication administration, use of spare AAIs, sharing medical information, and use of photos for identification.

Parents may withdraw consent at any time in writing. Schools will update records within 48 hours and review risk management plans.