

BILLINGHAY CE PRIMARY SCHOOL

ALLERGY SAFETY POLICY

September 2026

Billinghay CE Primary School is committed to providing a safe, inclusive and supportive environment for all pupils with allergies. This policy outlines our approach to allergy management, including how the whole school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our pupils with allergies to ensure their well being and inclusion. We recognize that allergies can be life threatening and that effective management is essential to safeguard the health, wellbeing and educational participation of affected pupils.

This policy is based on the DfEs Allergy Safety in Schools Guidance (July 2026) and is to read alongside other school policies inc: Managing medicines, Asthma, First aid etc.

Mr Allen is the Designated Allergy Lead and the named member of the senior leadership team with responsibility for allergy safety.

Our Allergy Safety policy will be reviewed annually however a review would take place where incidents or near misses suggest areas for improvement.

What is an allergy?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

Roles and Responsibilities

Billinghay CE Primary School takes a whole school approach to allergy management.

Designated Allergy Lead

The Designated Allergy Lead is Mr Allen. He reports to the lead governor for Safeguarding, Mr D Gates.

They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;
- Championing and practising allergy awareness across the school;
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff although the collation of information will be delegated to our admin staff.

- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy.
- Reviewing the school's stock of spare adrenaline pens (check the school has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline pens are stored appropriately) and ensuring staff know where they are.
- Keeping a record of any allergic reactions or near-misses, reporting these to the appropriate authority (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy; and
- Ensuring there is an anaphylaxis drill once a year.

The School Admin Team

Mrs Woolerton is responsible for:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity.
- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families.
- Supporting the Designated Allergy Lead with disseminating this information to all school staff, including supply staff and those from external agencies working with children in school.
- Ensuring the information from families is up-to-date, and reviewed annually (at a minimum). Coordinating medication with families and ensuring medication is in date.
- Keeping an adrenaline pen register to include adrenaline pens prescribed to pupils and the school's stock of spare adrenaline pens, including brand, dose and expiry date. The location of spare adrenaline pens should also be documented.
- Regularly checking spare adrenaline pens are where they should be, and that they are in date.
- Replacing the spare adrenaline pens when necessary.
- Providing on-site adrenaline pen training for staff and pupils and refresher training as required e.g. before school trips; and
- Add any other responsibilities delegated by Designated Allergy Lead.

All staff

All school staff, including teaching staff, support staff, occasional staff (for example sports coaches, music teachers etc) are responsible for:

- Championing and practising allergy awareness across the school.
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed.

- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to.
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate.
- Ensuring pupils always have access to their medication or carrying it on their behalf [depending on the age of the pupils and the management of adrenaline pens in the school].
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training.
- Taking part in training and anaphylaxis drills as required (at least once a year). Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager.
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy.
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the School Admin Team and Mr Allen.
- Ensuring that pupils have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site for an educational visit etc.

Parents/Carers

All parents and carers (whether their child has an allergy or not) are responsible for:

- Providing the school with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema.
- Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising events.

Parents/Carers of children with allergies

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan. The Allergy Action Plan will be given to the parents/carers at the hospital and they are responsible for providing school with a copy of this plan.
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, ie. spoon or syringe), inhalers or creams.
- Ensure medication is in-date and replaced at the appropriate time.
- Ensure their child has access to their allergy medication, including two adrenaline pens if prescribed, on the journey to and from school.
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too.

Awareness Training

All staff present during times when pupils are scheduled to be on site will receive allergy awareness training. This includes permanent staff, temporary staff, supply teachers and regular volunteers. Training will be included in induction arrangements for new staff.

Allergy awareness training should ensure all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it.
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist.
- Understand the difference between food allergy, coeliac disease and food intolerance.
- Know where to find information on allergy triggers.
- Can identify the range of symptoms of allergic reactions.
- Understand and can recognise anaphylaxis.
- Know how to respond in an emergency, including calling emergency services and informing parents. How to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack). Training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices).
- Understand the impact allergy can have on a child or young person's wellbeing.
- Know how to check whether an individual is on the record of those with known allergy and how to use an Allergy or Asthma Action Plan.
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens.
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a "near miss").

Wellbeing

The risk posed by allergy (and the possibility of anaphylaxis) can be a significant cause of anxiety. Any incidents of bullying of children with an allergy will be addressed in line with our anti Bullying and Behaviour Policies.

Minimising Risk

As a school we will minimize the risk of individuals coming into contact with their known allergens. This includes:

- Obtain detailed allergy information from parents/carers when pupils enrol.
- Maintain an up-to-date register of pupils and staff with allergies.
Recording: the allergen(s), severity of reactions, signs and symptoms, required medication and emergency procedures.
- Ensure information is accessible to relevant staff and agency staff while maintaining confidentiality including known allergens, symptoms and emergency response plans.

- Develop Individual Healthcare Plans for each child with a significant allergy.
- Ensure that our school meals provider provides accurate ingredient lists for the food that they provide. Menu information is shared with parents a term in advance by Ideal.
- Staff planning any activity will consider the risk of exposure to allergens, for example in art, science or cooking activities etc, or where activities involve animals.
Staff will avoid using food items containing known allergens in classroom activities where possible.
- Specific risk assessments will be put in place to manage the risks of exposure to allergens in individuals with an allergy when planning external educational visits etc.
- School will encourage regular handwashing with soap and water, especially before and after eating.
- Clean tables, equipment and shared surfaces thoroughly.
- Discourage sharing of food, drinks, utensils and lunchboxes.
- Have clear emergency systems in place.
- Ensure all staff have training.
- Communicate with parents/carers about food brought into school.

Food brought into school

It is vitally important that everyone is allergy aware and remains vigilant.

To help keep all pupils safe, please do not send food containing peanuts or tree nuts into school.

We also ask that parents do not send homemade food into school for sharing (eg to celebrate a child's birthday or for fund raising activities) unless ingredient information is provided in advance.

Children must not share food or drink with others for example a snack or from their packed lunch or hot food option at lunch time. They must also not share utensils.

Individual children

The school has a register of pupils who have a diagnosed allergy. This includes their known allergens, whether they carry prescribed medication (for example adrenaline autoinjector devices) and if they have Individual Healthcare Plans and/or an Allergy Action Plan.

Individual Healthcare Plans

Children and young people should have an Individual Healthcare Plan (IHP) if:

- they have an allergy which has a functional impact on them in their school.
- they are at risk of harm as a result of their allergy and
- they require arrangements which are additional to or different from those made generally.

The IHP will set out the additional and/or different arrangements that will be in place in the school for supporting the child with their medical condition or allergy, including in emergency situations.

This includes children and young people whose allergies require flexibility and "reasonable adjustments", as well as those who require medication (either proactively or in an emergency situation).

Where children and young people have an Allergy Action Plan and/or Asthma Action Plan issued by a healthcare professional, the IHP should refer to or attach it. Whenever an updated Action Plan becomes available, the child or young person's Individual Healthcare Plan should be reviewed to incorporate it.

Prescribed Adrenaline

All children who are prescribed adrenaline devices must have rapid access to them at all times. In cases of anaphylaxis, adrenaline should be administered within five minutes.

Adrenaline pens will be stored in the child's classroom. Every member of staff in school must be made aware of the location. Pens will be labelled with the pupil's Allergy Action Plan.

The admin staff (Mrs Woolerton) will carry out spot checks to ensure that adrenaline pens are where they should be and are in date.

Any used or out of date pens are to be given to parents to dispose of as sharps.

Pupils in Y5 and Y6 are responsible for carrying their own pens with them at all times.

Where children have to take individually prescribed adrenaline devices home (for example at the end of the school day) it is the class teacher's responsibility (can be delegated to a member of support staff) to ensure the pen is given to the child (unless the child is in Y5 or Y6 as they will carry their own pens). Parents/carers are responsible for ensuring the pens come into school on the following day etc.

On educational visits, the visit leader must ensure that any pupils with adrenaline pens have these available at all times. They must also ensure that a spare adrenaline pen is carried in the first aid kit and this first aid kit is taken with the visit leader at all times on the visit.

'Spare' adrenaline devices

Spare adrenaline devices will be kept in the kitchen. They must be not locked away. They will be stored in pairs, so that if a second one is necessary it is on hand.

Spare adrenaline devices will be clearly labelled, to avoid confusion with adrenaline devices prescribed to a named person. They will be kept in a box marked 'emergency anaphylaxis kit' with instructions for their use.

A member of the school admin team, Mrs Woolerton, is responsible for regularly checking the devices are present and referring to the adrenaline pen register to determine the expiry date and replacing accordingly.

Response to a reaction

If a pupil has an allergic reaction:

- Treat the pupil in accordance with the Allergy Action Plan.
- Instigate the school's Critical Incident Plan.
- If anaphylaxis is suspected, administer adrenaline without delay. Call for help and do not leave the child unattended.
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them.
- Use pupil's own prescribed medication if immediately available.

- Pupil can administer the adrenaline pen themselves [if able to] or a member of staff can administer pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline.
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen.
- Call 999 and state anaphylaxis.
- Call parent/carers as soon as possible.
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. In exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life.
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given.
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent/carers arrives.

Visits and Trips

A risk assessment will be carried out for any child at risk of anaphylaxis taking part on a school trip. The child's own adrenaline device will be carried by the adult supervising the group the child is in at all times (unless the child is in Y5 or Y6 when they are responsible for carrying their own device) and a spare adrenaline device in the first aid kit with the visit leader unless the visit leader is not in a group with the child, in which case a suitably named adult will carry the spare device so it close to the child at all times.

The visit leader will have a register of pupils with allergies and details of their medication, for each visit. They will ensure that the staff supervising the pupil(s) are aware of the allergy and medication plus the risk assessment.

No child with allergies will be excluded from taking part in a school visit.

Serious Incident or Near Miss

Serious Incidents or near misses must be reported to the Allergy Lead who will report to the named Governor.

In some cases, the impact of exposure to an allergen while in the educational setting may not be recognized until the child is back at home. In such instances it is important that the parent/carers reports there has been an incident

Information Sharing

A child's health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Schools have a lawful basis to hold, use and

share a child's special category health data when this is necessary, but it should always be done in a controlled and respectful way, because unnecessary sharing can reduce children's confidence in practitioners and can be embarrassing for children who may not want to be singled out.

Template A: individual healthcare plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to