Penketh South Primary School & Nursery

Allergy Policy

Date of this Review	October 2026
Next Review due	Autumn 2027
Approved by Governors	
Policy Revisions	New Policy

Penketh South Community Primary School
Allergy Policy

Date of Policy: October 2026

Staff Author: Claire Lawton

Review Date: Autumn term 2026

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1. Aims

Penketh South Primary School is committed to providing a safe, inclusive environment in which pupils with allergies can participate fully in school life. This policy aims to:

- Reduce the risk of exposure to known allergens and set out clear procedures for responding to allergic reactions and anaphylaxis.
- Ensure pupils with allergies are supported through appropriate individual arrangements, without unnecessary restriction or exclusion.
- Promote consistent allergy awareness among staff, pupils, parents/carers, visitors, contractors and catering providers.
- Ensure emergency medication is accessible, appropriately stored, checked and administered without avoidable delay.
- Support the emotional wellbeing, dignity and inclusion of pupils living with allergies.

2. Legislation and guidance

This policy has been developed with reference to the Department for Education statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, Department of Health and Social Care guidance on emergency adrenaline auto-injectors in schools, and relevant food information legislation. It should be read alongside current statutory guidance and the school policies listed in section 14.

- The Food Information Regulations 2014.
- The Food Information (Amendment) (England) Regulations 2019.
- The Human Medicines (Amendment) Regulations 2017.
- The Equality Act 2010, where an allergy has a substantial and long-term adverse effect on a pupil's ability to carry out normal day-to-day activities.
- UK GDPR and the Data Protection Act 2018 in relation to health information.

3. Roles and responsibilities

Governing Body

The Governing Body is responsible for ensuring that allergy-related risks are appropriately identified and managed and that the school has effective arrangements to reduce exposure to known allergens and respond to anaphylaxis. It delegates day-to-day implementation to the Allergy Safety Lead while retaining strategic oversight.

Allergy Safety Lead

The nominated Allergy Lead for Penketh South is the Headteacher. She is supported by Deputy Allergy Safety Lead is Lorraine Browne. The Allergy Safety Lead is responsible for:

- Implementing and reviewing this policy at least annually and following any significant incident or near miss.
- Maintaining allergy awareness across the school community.
- Ensuring relevant allergy information is current and readily available to staff who need it.
- Ensuring pupils who require additional arrangements have an up-to-date Individual Healthcare Plan (IHP), and that pupils with known food or insect-sting allergies have an appropriate allergy action plan issued by a healthcare professional.
- Ensuring staff receive appropriate annual allergy awareness and emergency response training, with additional role-specific training where required.
- Overseeing arrangements for safe storage, access, checking and disposal of adrenaline devices (ADs), including spare adrenaline auto-injectors (AAIs) held by the school.
- Ensuring activities that may increase allergy risk are appropriately risk assessed.
- Reviewing serious incidents and near misses, identifying learning and ensuring necessary changes are made to procedures, risk assessments or IHPs.

Headteacher

The Headteacher is responsible for ensuring that this policy is implemented effectively and for deciding, in consultation with parents/carers and relevant healthcare professionals, whether a pupil's needs can be managed through the school's general medical arrangements or require an IHP.

Medication checks

The Kitt allergy service tracks and monitors all Epipens on site. The deputy allergy lead will be responsible for ensuring the KITT website portal is up-to-date.

Replacement devices will be sent automatically by KITT when use-by dates are approaching. Replacement devices will also we sent if the epipen is used.

Teaching and support staff

All teaching and support staff are responsible for:

- Maintaining awareness of this policy and of pupils with allergies in their care.
- Completing mandatory allergy awareness training annually
- Recognising signs of mild and severe allergic reactions and responding promptly.
- Following individual allergy action plans and IHPs.
- Reducing foreseeable exposure to known allergens while maintaining pupil inclusion.
- Ensuring emergency medication accompanies pupils when required, including during offsite activities.
- Reporting allergic reactions, medication administration, incidents and near misses promptly to the Allergy Safety Lead so these can be logged on I am compliant and KITT portal.

Parents/carers

Parents/carers are responsible for providing accurate, current information about their child's allergies, dietary needs, previous reactions and prescribed medication. Where prescribed, parents/carers should provide two in-date adrenaline devices and any other required medication, replace these promptly before expiry, inform school immediately of changes, and follow school guidance about food brought onto the premises.

Pupils with allergies

Pupils will be supported, according to age, maturity and individual need, to understand their allergens, recognise symptoms and know how to seek help.

Other pupils

All pupils will be taught, in an age- and need-appropriate way, to respect the medical needs of others, not to share food or medication, and to seek adult help immediately if they believe another pupil is unwell.

4. Identifying individuals at risk

Allergy can include food allergy, allergic rhinitis, skin allergy, asthma triggered by allergens, and allergy to insect stings, medicines, latex, animals or other substances. Reactions vary in severity and may include anaphylaxis.

Pupils

Before admission, parents/carers are asked to provide medical and dietary information, including known allergies and medication. For pupils joining mid-year or receiving a new diagnosis, arrangements will be put in place as quickly as practicable and normally within two weeks.

Parents/carers are reminded to update medical information annually and must inform school promptly of any change by contacting the school **office at penkethsouth.tcat.uk.com** or by updating their child's profile on the Arbor App

Relevant information will be recorded on the school's management and medical systems and shared with staff on a need-to-know basis. Transition information from previous settings, healthcare professionals and the EHCP will also be considered where relevant.

Staff and visitors

Staff are encouraged to disclose allergies that may require workplace adjustments or emergency arrangements. Visitors undertaking activities involving food, animals or other foreseeable allergens will be asked to identify relevant needs in advance where appropriate. Contractors and visitors will be expected to follow site allergy controls.

Individual Healthcare Plans (IHPs)

An IHP will be considered where an allergy has a functional impact in school, creates a risk of harm, or requires arrangements additional to or different from those normally available. A formal diagnosis is not always necessary where healthcare professionals advise that symptom-based management is appropriate. IHPs will be developed by the deputy allergy lead with parents/carers and relevant professionals, implemented as soon as practicable, reviewed at least annually and updated whenever needs change.

Allergy and asthma action plans

Pupils with a known food or insect-sting allergy should have an appropriate allergy action plan from a healthcare professional. Pupils with asthma should have an asthma action plan. These plans should include consent and instructions for emergency medication and will be linked to the pupil's IHP where one is required.

Allergy register

The deputy allergy lead is responsible for maintaining an accessible register of pupils with known allergies. It records, as appropriate, known allergens and anaphylaxis risk factors, prescribed adrenaline device type and dose, consent information and a photograph for identification where consent has been obtained. Relevant information is available to staff in areas where pupils are supervised and where food is served or handled, while respecting data protection requirements.

5. Assessing risk

Individual risk assessment will be undertaken where a pupil at risk of anaphylaxis takes part in an activity that may increase exposure, including:

- Food technology, cooking and baking.
- Science activities involving food or other known allergens.

- Craft activities involving food packaging or allergenic materials.
- Animal handling or activities involving insects.
- School trips, residential visits, off-site alternative provision and community activities.
- Celebrations, fundraising events or other occasions where food is brought into school.
- Any activity where an individual pupil's known allergen may reasonably be present.

Risk assessments will be written by the teacher leading the activity in collaboration with deputy allergy lead. The risk assessment will consider reasonable adjustments, supervision, access to medication, staff competence, emergency communication and travel arrangements. Allergy will not be a reason to exclude a pupil from an activity.

6. Minimising risk

Hygiene and food-sharing

- Pupils are encouraged and supported to wash hands before and after eating.
- Food, drinks, containers, cutlery and utensils must not be shared between pupils.
- Named water bottles and clearly identified food containers are used where appropriate.
- Tables and food preparation areas are cleaned appropriately before and after use.
- Food brought into school for sharing must be agreed in advance with staff; where a pupil has a significant allergy, individual arrangements in the IHP take precedence.
- The school does not describe itself as completely "allergen-free", as this cannot be guaranteed; instead, proportionate controls are used to reduce foreseeable risk.

Catering

The school will work with TCAT Catering to provide safe and suitable meal options for pupils with allergies. Catering staff must have access to relevant allergy information, receive appropriate allergen training, follow food hygiene and cross-contamination controls, and comply with legal allergen-labelling requirements. Parents/carers may discuss individual dietary needs with the school and catering provider. Menu or ingredient changes must be checked so that agreed dietary requirements continue to be met.

Insect bites and stings

- Where a pupil has a known insect-sting allergy, their individual plan will identify preventative and emergency measures.
- When outdoors, pupils will normally wear appropriate footwear and food/drink will be covered where practical.
- Staff will be alert to increased insect activity and will take reasonable steps to reduce exposure.

Animals

- Pupils wash hands after contact with animals.
- Pupils with a known animal allergy will not be required to handle the relevant animal and reasonable alternative arrangements will be made.
- Animal visits and animal-care activities will be risk assessed where a known allergy is relevant.

Visits, transport and off-site activities

Pupils with allergies will not be excluded from visits, school transport, or off-site activities solely because of their allergy. Planning will ensure that relevant staff and providers know the pupil's needs, medication is immediately accessible, emergency arrangements are clear, and a trained member of staff is available where required.

For pupils at risk of anaphylaxis, prescribed devices and, where appropriate, school spare devices will accompany the activity in line with section 8.

7. Procedures for handling an allergic reaction

All staff expected to supervise pupils are trained to recognise allergic reactions and anaphylaxis and to respond without delay. This training will be renewed annually. The pupil's allergy action plan must be followed. If anaphylaxis is suspected:

- Administer the pupil's prescribed adrenaline device immediately in accordance with the action plan. If it is unavailable, faulty or cannot be used, a school spare AAI may be used where appropriate.
- Call 999 immediately and state "anaphylaxis".
- Keep the pupil under continuous adult supervision. Position them in accordance with current emergency guidance and do not allow them to stand or walk unnecessarily.
- If symptoms do not improve, or return, administer a second adrenaline dose after the interval specified in current emergency guidance/action plan, if a second device is available.
- Inform parents/carers as soon as emergency action is underway.
- Send the used device and relevant medical information with the pupil to hospital where appropriate.
- Record the incident and medication administered on I am Compliant and notify the Allergy Safety Lead so she can update the KITT portal.

Emergency treatment must not be delayed while seeking parental consent or checking records where immediate action is required to save life.

8. Adrenaline devices (ADs)

Prescribed devices

Pupils prescribed adrenaline devices should always have immediate access to them, including during lessons, social times, transport and off-site activities. Two devices should be available where prescribed. Medication will be stored in a clearly labelled, readily accessible, unlocked emergency medication location known to staff, protected from direct sunlight and temperature extremes. It must never be locked away in a manner that delays emergency access. A copy of the pupil's allergy action plan will be kept with or immediately accessible alongside the medication.

School devices

As part of the KITT allergy service, school will hold 4 devices – 2 paediatric devices (6 years and under) and 2 for children over 6 years. These devices are stored in the school office in the KITT holder allergy Box affixed to the wall.

Serial number of all devices are inputted onto the KITT portal together with use-by dates. The deputy allergy lead will keep these details up-to-date on the KITT portal

Emergency inhaler

The school also holds an emergency asthma reliever inhaler in accordance with applicable regulations and consent requirements. This is stored in the min office.

The deputy allergy lead will monitor use-by dates and arrange for a replacement as appropriate

Checking and disposal

Spare devices will be checked at least monthly by the deputy allergy lead. Used adrenaline devices are single-use and will be disposed of safely in accordance with manufacturer instructions and local clinical/sharps waste arrangements.

Emergency use without prior consent

In a life-threatening emergency, reasonable action may be taken to save life without delaying treatment to confirm prior consent.

Off-site use

A first aider will take responsibility for ensuring pupil's own devices remain accessible. A school spare device may be taken off site where this forms part of the pupil's risk assessment and is consistent with current guidance.

9. Serious incidents and near misses

A serious incident is an allergy-related event in which a pupil, staff member or visitor is harmed or placed at immediate and significant risk of harm, including an event requiring emergency medication, urgent clinical intervention or emergency services. A near miss is an event that caused no harm but had clear potential to do so.

Recording

Serious incidents and near misses will be recorded as soon as practicable using the school's accident/incident reporting arrangements. The record will include who was affected, what happened, when and where, known causes, actions taken, medication administered, whether emergency services were called and the outcome. The school will use a learning-focused, no-blame approach while addressing any individual or systemic failings appropriately.

Reporting and review

Parents/carers will be informed as soon as possible. The deputy allergy safety lead will input details onto I am compliant, review the incident, seek views from those involved where appropriate, identify lessons and update risk assessments, IHPs, training or this policy as necessary.

Incidents will be reported to the Health and Safety Executive under RIDDOR where the statutory reporting threshold is met via TCAT reporting arrangements.

10. Allergy awareness

Staff training

All staff expected to be present when pupils are on site will receive allergy awareness training at least annually. New staff will receive training as part of induction, and supply, agency and temporary staff will be given the information necessary to keep pupils safe before assuming responsibility for them. Catering staff and regular volunteers will receive training appropriate to their role.

Training will cover allergy risks, common triggers, the difference between allergy and intolerance, recognition of mild and severe reactions, anaphylaxis, emergency procedures, locating and administering medication, use of action plans, reducing exposure, wellbeing and incident reporting. Practical trainer devices will be used where available so staff can rehearse administration safely. The school will periodically test its emergency response arrangements through an allergy/anaphylaxis drill or scenario-based exercise.

Pupil and community awareness

The policy will be available on the school website and communicated to parents/carers. Pupils will receive age- and need-appropriate education about allergies, food sharing, respecting others' medical needs and how to summon adult help. Allergy awareness will be delivered in a way that avoids stigma, fear or the singling out of individual pupils.

11. Wellbeing

The school recognises that allergies can affect emotional wellbeing, participation and feelings of safety. Pupils with allergies will be supported through the school's relational and trauma informed approach, including

regular check-ins with class teacher as appropriate, reassurance about agreed controls, and opportunities to raise concerns. Bullying, teasing, deliberate exposure to an allergen or misuse of another pupil's medication will be addressed promptly in line with the school's Relationships and Resolution/Behaviour arrangements and safeguarding procedures where relevant.

Support following an incident or near miss

Following a serious incident or near miss, the school will consider the wellbeing needs of the pupil, their family, staff who responded and any witnesses. Appropriate pastoral support, debriefing and follow-up will be offered, alongside the formal incident review.

12. Information sharing

Health and allergy information is special category personal data. It will be handled in accordance with UK GDPR, the Data Protection Act 2018 and the school's Data Protection Policy. Information will be shared only where necessary for safety, care, education or legal compliance. Relevant staff, catering staff, and off-site providers will receive the information they need to manage risk safely.

13. Monitoring arrangements

The Allergy Safety Lead will monitor implementation of this policy. It will be reviewed at least annually and approved by the Governing Board, or sooner following a serious incident, near miss, significant change in pupil need, change to school arrangements or updated statutory guidance.