

Pupil allergy policy

Veritas Multi Academy Trust



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1. Aims

This policy aims to:

- 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
- Ensure the Trust and Schools remain compliant with Benedict's Law

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](#)

3. Roles and responsibilities

We take a Trust wide approach to allergy awareness.

3.1 Trust Allergy lead

The nominated allergy lead is Alison Moon, Trust Business Manager

They are responsible for:

- Implementation of the Allergy Policy across the Trust
- Compliance of the Trust to Benedict's Law and guidance as set out by the DfE.
- Health and Safety across the Trust, during and outside of the school day, including Site Management, Cleaning and external contractors / lettings are aware of their roles and responsibilities to allergy management.
- Liaison with internal and external catering providers to ensure they are meeting regulations of allergy management at all times.
- Oversight of training provision for Trust staff, volunteers and contractors.
- Ensuring School Allergy Leads are delivering on their roles and responsibilities.
- Regularly reviewing and updating the allergy policy
- Maintain oversight of the Trust's subscription with Kitt Medical.

3.2 School Allergy lead

Each school has a nominated School allergy lead, and they are responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils
- 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 (in liaison with Trust Allergy Lead)
 - 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
- Maintenance and management of stock of the school's emergency adrenaline auto-injectors (AAIs) via Kitt Medical Devices and individual pupil medication for those with AAIs.
- Ensuring that any use of emergency AAIs or prescribed AAIs are recorded via Medical Tracker and parents/carers are notified as soon as possible.
- Ensuring that any use of any school Kitt Medical AAIs are recorded on the Kitt Medical portal to manage supply and replacements, ensuring stock levels are maintained at all times.
- To ensure any reaction or near miss is reported to the Trust Allergy Lead and reported in accordance with RIDDOR.
- Whilst it is the parent/carers responsibility to ensure all medication is in date, the School Allergy Lead will check medication kept at school on a termly basis and send reminders to parents if medication is approaching expiry, via Medical Tracker.
- Ensuring their school emergency action plans which include plans for pupils with known allergies, as well as provision for access to emergency Kitt Medical devices in emergency lockdown protocols.
- Keep an offline record of allergy management, should systems go offline.

3.2 School First Aid Lead

The School First Aid is responsible for liaising with the Allergy Lead and:

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

3.3 All staff

All teaching and support staff are responsible for:

- Completing allergy and anaphylaxis training annually.
- 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
- Being aware of and maintain record of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning and ensure adequate supervision for any food-related activities, art materials or sensory plan and communicate to parents in advance.
- Ensuring the wellbeing and inclusion of pupils with allergies
- Know the location of emergency / pupil medication for those in their care, at all times.

- Understand and follow individual health care plans
- Be vigilant during any snack times, particularly with milk, for those with lactose allergies in EYFS.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication.

3.4 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. This includes any known, or suspected allergies and any prescribed medication.
- 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 and in date at all times.
- 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 and allergy management.

3.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose and having a good awareness of symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- 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

3.6 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

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

5. Managing risk

5.1 Hygiene procedures

Each school will ensure:

- Pupils are reminded to wash their hands before and after eating
- Ensure adequate handwashing facilities are available and working
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 Catering / Midday Lunch Supervision

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

- Catering and midday supervisor staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view with ingredients and allergens 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
- Maintain accurate records of pupils with known allergies and determine a system for ensuring pupils with known allergies are identified and catered for appropriately.
- Implement robust systems to prevent cross-contamination in the kitchen
- Maintain separate preparation areas / equipment for allergen-free meals where necessary
- Keep detailed records of ingredients and suppliers used
- Offer suitable alternatives for pupils with allergies
- Review recipes and ingredients used regularly
- Label food clearly at the point of service
- Plan for special events for catering with allergies in mind.
- Ensure all pupils are thoroughly supervised when eating.
- Manage food sharing between pupils, particularly those with packed lunches

5.3 Wrap Around Care – including Breakfast and After School Clubs

- Maintain up to date record of pupils with allergies per after school club or wrap-around care & know which pupils have allergies
- Plan activities involving food or materials that could trigger allergies carefully & communicate with parents in advance
- Supervise pupils with known allergies during activities
- Know the location of emergency / pupil medication times for those in their care
- Understand and follow individual health care plans
- Ensure sufficient First Aid trained staff are also on site (although training provided to all to administer emergency medication)
- Ensure all staff are trained in allergy management

5.4 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.

5.5 Insect bites/stings

When outdoors:

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

5.6 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

5.7 Support for mental health

Pupils with allergies will have additional support through:

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

5.8 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 (see section 7.5).

5.7 Site Management

- Ensure effective site cleaning protocols for dining halls and classrooms
- Ensure adequate handwashing facilities are available and working
- Maintain ventilation systems appropriately
- Keep outdoor areas clear, clean and free from potential allergens (eg. Bee, wasps nests)

- Ensure corridors and pathways are clear at all times to ensure emergency medical supplies and/or emergency services can attend allergy emergencies quickly.
- Ensure those using the school for Lettings have access to emergency medical equipment
- Ensure contractors are aware of the Allergy Policy and their roles and responsibilities in allergy management
- Check spaces following lettings hire for any potential allergy contamination.

5.7 Lettings / Facilities Hire

The Trust Allergy Lead / Site Manager will ensure:

- The lead contact for letting the school premises, has received and is aware of the need to circulate, sufficient allergy awareness training
- Are aware of the location of emergency medical AAls
- Ensure lettings providers are aware of their duty to report any allergic reactions / near misses to the Allergy Lead within the School / Trust
- Ensure those on site, understand that they must not bring certain allergens on site (ie. Nuts)
- Ensure those on site understand cleaning protocols, particularly if food related activities have been present.

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAls

- The school maintains a register of pupils who have been prescribed AAls or where a doctor has provided a written plan recommending AAls to be used in the event of anaphylaxis. The register includes:
 - Known allergens and risk factors for anaphylaxis
 - Whether a pupil has been prescribed AAl(s) (and if so, what type and dose)
 - Where a pupil has been prescribed an AAl, whether parental consent has been given for use of the spare AAl, which may be different to the personal AAl prescribed for the pupil
 - A photograph of each pupil to allow a visual check to be made (with parental consent)
- The register is kept in an easily accessible location and can be checked quickly by any member of staff as part of initiating an emergency response.

Allowing all pupils to keep their AAls with them will reduce delays and allows for confirmation of consent without the need to check the register.

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 AAls 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 AAl needs to be administered, a member of staff will use the pupil's own AAl, or if it is not available, a school one
- If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, administer the school's emergency AAls (unless parents/carers have specifically objected/opted out of this).

This information has been collected from Allergy UK, Anaphylaxis UK and approved by the Department of Education for the emergency treatment and management of anaphylaxis (correct at time of writing – June 2026):

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 severe 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 pupil 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 should be administered without delay.

Each school within the Trust has access to Kitt Medical devices, containing appropriate doses of adrenaline via AAI(s). These work as defibrillators, but for allergies.

Action:

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD 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. AAI's should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device and choose the appropriate dosage for the age and/or size of the child, as outlined on the Kitt Medical 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 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.

All incidents of anaphylaxis must be recorded via Medical Tracker (on the same day or as close to the incident as possible) and reported to parents/carers as soon as possible.

If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed

If a parent/carer does not wish for their child to be administered emergency AAls, they should contact the School Office and School Allergy Lead.

7. Adrenaline auto-injectors (AAls)

Following the Department of Health and Social Care's Guidance on using [emergency adrenaline auto-injectors in schools](#), set out your school's procedures for AAls, covering these areas:

7.1 Purchasing of spare AAls

The Trust allergy lead is responsible for buying AAls and ensuring they are stored according to the guidance, including:

- The quantity of AAls required
- Managing the relationship with Kitt Medical
- The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of [the guidance](#))

7.2 Storage (of both spare and prescribed AAls)

The School allergy lead will make sure all AAls 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

Spare AAls will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAls)

The Trust and School Allergy Leads are responsible for checking monthly that:

- The AAls are present and in date
- Replacement AAls are obtained when the expiry date is near

7.4 Disposal

AAls 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 AAls off school premises

Pupils at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on school trips and off-site events

Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication may not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils.

Overnight school trips should be possible with careful planning and a meeting for parents with the lead member of staff planning the trip may be arranged.

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 date with monthly checks recorded via Kitt Medical and/or Medical Tracker
- A note of arrangements for replacing injectors via Kitt Medical
- A list of pupils to whom the AAI **cannot** be administered
- A record of when AAIs have been administered via 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 and this frequency will be monitored by the Trust Allergy lead.

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
- First Aid Policy

This policy is new, introduced in July 2026 ahead of legislation being introduced for Benedict's Law from September 2026. This policy is therefore subject to change depending on requirements outlined from the DfE and will be monitored closely in line with legislation and practice and procedures which will be implemented across the Trust from September 2026 onwards.