INSPIRES MAT

Allergy and Food Management Policy

Document Detail	
Category:	NON-STATUTORY
Authorised By:	CEO
Status:	Approved
Date Approved:	January 2026
Version Date	October 2024 – The Key
Next Review Date:	Every two years: January 2028

Contents

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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

Inspires MAT schools cannot guarantee a food allergen free environment but will work to minimise the risk by hazard identification, risk management, communication and instruction.

This policy applies to all school food as follows:

- Breakfast Club
- School Lunch
- After School Clubs
- Breaktime snacks
- Classroom food
- Staffroom food
- School trips
- School events and celebrations

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 whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is Mrs Gigg, our SENCo and Deputy Headteacher.

They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils (although the allergy lead has ultimate responsibility, the information collection itself may be delegated to the administrative staff or other staff member)
- 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
    - 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
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Regularly reviewing the allergy policy

3.2 School Office Team

The school office team is responsible for:

- 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 Teaching and support staff

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 liaising with the Catering Manager for support.
- For a regular cooking club the Supervisor should attend Level 2 Food and Hygiene Training and have a good understanding of Allergens and its management.
- Completing a Risk Assessment for all class cooking
- Food for classroom projects/activities must be ordered through the Catering Manager.
- Ensuring the wellbeing and inclusion of pupils with allergies

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

- 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 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

3.5 Pupils with allergies

These pupils 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

3.6 Pupils without allergies

These pupils are responsible for:

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

Older pupils might also be expected to support their peers and staff in the case of an emergency.

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

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 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/carers. Allergen information is available on request.
- Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils
- Authorised, approved suppliers are used for school food purchases.
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

- Catering Staff ensure that Breakfast Club and After School Club (where applicable) follow the same allergen processes in place for school lunches.
- The Catering Manager must have oversight of every aspect of food in the school, as they hold the highest Allergen qualification amongst the school staff.

5.3 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.

All schools in Inspires MAT are ‘nut aware’.

5.4 Insect bites/stings

When outdoors:

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

5.5 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

5.6 Support for mental health

Pupils with allergies should be supported to feel safe, included and confident within the school environment. Staff should be aware that having an allergy may cause anxiety, embarrassment or feelings of isolation, and that pupils may be particularly vulnerable to bullying or unwanted attention.

The school will:

- Follow the school’s behaviour and anti-bullying policies, with any bullying, teasing or deliberate exposure to an allergen treated seriously and addressed promptly.
- Ensure pupils know who they can speak to if they are worried, anxious or experiencing bullying, such as their class teacher, pastoral lead, safeguarding lead or another trusted member of staff.
- Provide opportunities for pupils to discuss their concerns privately and sensitively, and monitor their wellbeing where there are concerns about anxiety, low mood or social isolation.
- Work with parents/carers and, where appropriate, the school’s pastoral or mental health support services to provide additional support.
- Promote an inclusive school culture through age-appropriate education about allergies, helping pupils understand that allergies are medical conditions and should never be a source of shame or ridicule.
- Avoid unnecessarily singling out pupils with allergies while ensuring that appropriate safety measures are in place.
- Monitor identified pupils and review support regularly, particularly following incidents of bullying, an allergic reaction, or a significant change in their circumstances.
- Record and respond appropriately to any concerns in accordance with the school’s behaviour, safeguarding and anti-bullying procedures.

Pupils with allergies will have additional support through:

- Pastoral care (where needed)
- Regular check-ins with their class teacher

5.7 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
- The Catering Manager must be informed well in advance of any requirements for packed lunches.
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

5.8 School Events

- Where cake sales, coffee mornings or similar food inclusive events are held, allergen information must be provided on pre-packed products or be available for unwrapped products at the point of sale.
- Separate display plates and utensils must be used to avoid cross contamination
- Staff or volunteers manning such stalls must be aware of allergen controls.

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAIs

This links to Medical Policy and First Aid Policy.

- The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs 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 (this will require parental consent)
- The register is kept in the front of each class medical folder and can be checked quickly by any member of staff as part of initiating an emergency response

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 AAIs 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 AAI needs to be administered, a member of staff will use the pupil's own AAI, 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, if needed, the school's normal emergency procedures:

The school will respond to allergic reactions in accordance with the pupil's individual Allergy Action Plan/Individual Healthcare Plan, the school's first aid and emergency procedures, and relevant medical guidance.

All staff should be aware of the signs and symptoms of an allergic reaction and know how to respond. Symptoms of anaphylaxis can develop very quickly and may include swelling of the throat or tongue, difficulty breathing, wheezing, difficulty swallowing, dizziness, confusion, collapse or loss of consciousness. A serious allergic reaction should be treated as a medical emergency.

In the event of a suspected anaphylactic reaction:

1. **Stay with the pupil and assess the situation.** If anaphylaxis is suspected, action must be taken immediately and staff should not wait for symptoms to become more severe.
2. **Administer the pupil's prescribed adrenaline without delay**, using their adrenaline auto-injector or other prescribed adrenaline device, in accordance with their Allergy Action Plan and the instructions for the device. Adrenaline is the first-line treatment for anaphylaxis. (
3. **Call 999 immediately** after administering the first dose of adrenaline. Tell the emergency operator that the pupil is experiencing **anaphylaxis**, provide the school's full location and any other information requested. An ambulance must be called even if the pupil begins to feel better following adrenaline.
4. **Keep the pupil in an appropriate position and do not allow them to stand or walk.** Where possible, the pupil should lie flat with their legs raised. If they are having difficulty breathing, they may be propped up with their legs stretched out. If they are unconscious but breathing, they should be placed in the recovery position.
5. **Record the time the first dose of adrenaline was administered.** If symptoms do not improve after five minutes, or symptoms worsen, a second dose of adrenaline should be administered if available and appropriate.
6. **Remain with the pupil until the emergency services arrive.** A member of staff should meet/direct the ambulance crew to the pupil where practical, while another member of staff maintains the school's normal emergency arrangements.
7. **If the pupil becomes unresponsive and is not breathing normally**, staff should follow the school's normal emergency first-aid procedures, including CPR and use of an AED where appropriate, while following instructions from the emergency services.
8. **The pupil should be taken to hospital by ambulance** following suspected anaphylaxis. Staff should not attempt to transport the pupil to hospital themselves.

Following an allergic reaction

Following any significant allergic reaction or suspected anaphylactic episode, the school will:

- inform the pupil's parent/carer as soon as reasonably practicable;
- ensure the incident is recorded in accordance with the school's accident, medical and safeguarding procedures. For an allergic reaction which used the AAI from KITT Medical, the incident should be recorded on the KITT Medical portal.
- review the pupil's Allergy Action Plan/Individual Healthcare Plan with the parent/carer and relevant healthcare professionals where appropriate;
- review the circumstances surrounding the reaction and consider whether any additional risk-reduction measures are required;
- ensure any medication used is replaced as soon as possible;
- review whether staff training or the school's emergency arrangements need to be updated.

Mild allergic reactions

Where a pupil develops symptoms that are not consistent with anaphylaxis, staff should follow the pupil's individual Allergy Action Plan and the school's normal medical procedures. The pupil should be monitored closely for any deterioration or development of symptoms associated with anaphylaxis. If there is any doubt about the severity of the reaction, staff should act promptly in accordance with the pupil's emergency plan and seek emergency medical assistance where appropriate.

Antihistamines may be appropriate for some mild allergic symptoms where they have been prescribed or included in the pupil's individual plan; however, antihistamines must **not** be used as a substitute for adrenaline where anaphylaxis is suspected.

- A school AAI device will be used instead of the pupil's own AAI device if:
    - Medical authorisation and written parental consent have been provided, or
    - The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer 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/carers informed

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAIs

The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance.

Adrenaline Auto-Injector Guidance for Schools | Anaphylaxis UK – guidance for schools including template letters to request AAIs from pharmacy.

Guidance on the use of adrenaline auto-injectors in schools – DfE Guidance for schools

Procedure for buying spare AAIs:

- School has subscribed to Kitt Medical which provides spare AAIs
- 2 AAIs are held in each school - 2 for under 6 year olds and 2 for over 6 year olds
- The AAIs are provided by KITT Medical
- The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of the guidance DfE) – see KITT guidance

(See pages 11 and 12 of the DfE guidance)

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

- Stored in the KITT medical box, in the medical area of the school office. There is a key to unlock the box, to release it. These are kept: on the Head teacher's desk, on a lanyard to the right of the KITT medical box, in the key box, labelled number 12, and in an emergency access box, to the left of the KITT medical box.
- 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 – see above
- **Not** located more than 5 minutes away from where they may be needed
- Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

(See pages 12 and 13 of the DfE guidance.)

7.3 Maintenance (of spare AAIs)

- When the KITT medical box first arrives in school, the allergy lead or Head teacher will check the pens are in date and record their expiry date and LOT number of the KITT medical portal.
- KITT medical will replace the pens before they expire and if they are used

7.4 Disposal

AAIs can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions (for example, in a sharps bin for collection by the local council).

(See page 13 of the DfE guidance.)

7.5 Use of AAIs 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
- A risk assessment addressing allergen exposure in each activity, emergency medication, transport, and proximity to local emergency care will be undertaken, with control measures identified. In order to ensure the pupil is safe and included, alternative activities will be planned where necessary. This will include the safe storage of adrenaline for the duration of the school trip.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils have their medication, including adrenaline devices, with them before departure. Pupils unable to produce their required medication will not be able to attend the excursion.
- In conjunction with the allergy lead/school nurse/medical officer, the trip leader will review the risk assessment to determine whether the school's spare adrenaline devices should be taken on the trip. The school will provide additional spare adrenaline devices should the risk assessment for the trip deem this necessary, ensuring that pupils remaining in school still have access to spare adrenaline devices should the need arise.

(See page 13 of the DfE guidance.)

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 (see KITT portal)
- A note of arrangements for replacing injectors (see KITT portal)
- A list of pupils to whom the AAI can be administered
- A record of when AAIs have been administered (see KITT portal)

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 by the allergy lead. It is provided via the KITT medical portal.

9. Record Keeping

- All staff training must be recorded on the KITT Medical portal.
- All food allergy incidents must be reported, investigated and documented. This includes ‘near miss’ incidents.
- Feedback from any incident must be shared with relevant staff to promote improved practice.

Lessons must be learned and procedures and protocols must be updated to reflect any learning from incidents.

Allergy Action Plans

• These are clinical documents created by a GP, allergy nurse or allergy clinic. They detail the pupil's allergy and medication.

• These contain parent/carer contact details and must be signed by the parent/carer, as this is the parental authority to administer medication, including administration of spare adrenaline devices.

• These will only be updated by the medical professional following a review of the pupil's allergy management, which could be annually or five-yearly. Parents/carers or the school need to update the pupil's photo annually so that they remain recognisable.

Allergy Action Plans are issued for pupils who have an IgE food allergy, and often a venom allergy, that could lead to anaphylaxis. They are not issued for all allergies. Pupils with non-IgE allergies do not experience anaphylaxis, so an Allergy Action Plan is not issued.

Individual Healthcare Plans (IHPs)

Individual Healthcare Plans are an essential communication tool that provide clarity about the arrangements which need to be in place to ensure a pupil is fully included in the life of the school. They identify the exact risk-mitigation measures that need to be followed.

IHPs are school-owned documents that are co-created by the school, parents/carers and pupils.

They should include any advice received from health professionals. If there is no advice from health professionals, information and support can be requested from the allergy lead/school nurse/medical officer if needed.

Where a pupil has an Allergy Action Plan and/or an asthma plan, this must be included with the IHP.

It is good practice to review IHPs annually or when staff change; however, they must be reviewed if an incident or near miss occurs. They need to be brought to the attention of supply or cover staff, and passed on during transition to a new school.

Silver End Academy will ensure that:

• pupils with an Allergy Action Plan and/or an asthma plan have an IHP;

• pupils without an Allergy Action Plan or asthma plan, but who have an allergy that needs active management over and above what other pupils need, will have an IHP; and

• IHPs are created whilst pupils are waiting for a diagnosis.

10. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Medical Policy
- First Aid Policy