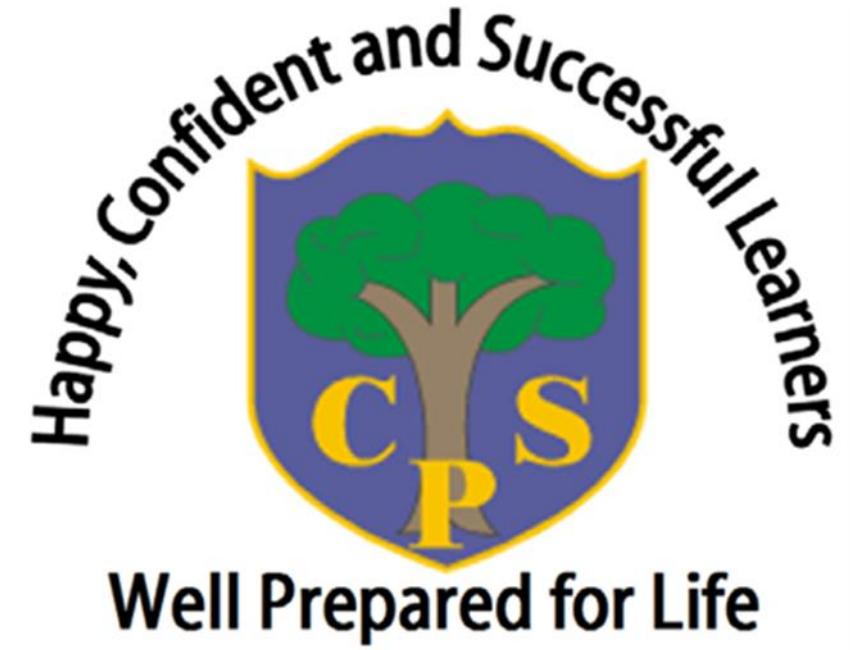

Allergy and Anaphylaxis Policy (2025/26)

Written by	**Billy Hutt**
Approved by Trustees	**November 2026**
Date for Review	**November 2027**

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Chapter 1: Governance, Policy Statement and Legislative Framework

1.1 Introduction

The Board of Trustees of The Coppice Primary School recognises that effective allergy management is a fundamental safeguarding responsibility. This policy establishes the strategic framework through which the academy will identify, assess and manage allergy risks while ensuring that pupils with allergies are able to participate fully, safely and confidently in all aspects of school life.

The academy acknowledges that an allergen-free environment cannot be guaranteed. Instead, it is committed to implementing proportionate, evidence-informed control measures that reduce foreseeable risks, support inclusion and promote a culture of shared responsibility.

1.2 Vision and Policy Commitment

Our vision is to create an allergy-aware school community where safeguarding, inclusion and education are mutually reinforcing. Governors expect allergy management to be embedded within leadership, curriculum planning, educational visits, catering, wraparound provision and emergency preparedness rather than existing as a stand-alone medical procedure.

The academy will maintain a whole-school approach based on prevention, preparedness, partnership with parents and continuous improvement.

1.3 Governance Principles

The Board of Trustees will provide strategic oversight of allergy management by:

- approving and reviewing this policy annually;
- ensuring sufficient resources are available for implementation;
- monitoring compliance through reports, audits and incident reviews;
- promoting continual improvement through governance challenge and assurance; and
- ensuring that allergy management remains integrated with safeguarding, health and safety and equality arrangements.

1.4 Legislative Framework

This policy reflects the statutory duties placed upon schools through health and safety, safeguarding, education, equality, medicines, food safety and data protection legislation. Key legislation includes the Health and Safety at Work etc. Act 1974, the Management of Health and Safety at Work Regulations 1999, the Children Act 1989, the Children Act 2004, the Education Act 2002, the Children and Families Act 2014, the Equality Act 2010, the Human

Medicines Regulations 2012, the Food Safety Act 1990, the Food Information Regulations 2014, the Data Protection Act 2018 and UK GDPR.

1.5 Statutory and Professional Guidance

In addition to legislation, the academy will implement current Department for Education statutory guidance, including Allergy safety in schools and Supporting Pupils at School with Medical Conditions. Allergy arrangements will also complement Keeping Children Safe in Education, Working Together to Safeguard Children, the SEND Code of Practice and the EYFS Statutory Framework.

Operational practice will be informed by recognised professional guidance from the Resuscitation Council UK, BSACI and Anaphylaxis UK where appropriate.

1.6 Benedict's Law

This policy reflects the strengthened national expectations for allergy safety commonly associated with Benedict's Law and the accompanying Department for Education guidance. The Board of Trustees will monitor future legislative or statutory developments and ensure that academy procedures are reviewed promptly whenever national requirements change.

1.7 Governance Assurance

Governance responsibility	Evidence expected
Leadership	Annual Headteacher report
Training	Whole-school training records
Healthcare Plans	Current plans and review schedule
Risk management	Risk assessments and audits
Incidents	Analysis of incidents and near misses
Policy review	Annual Trustee approval

1.8 Conclusion

This chapter establishes the governance, legal and strategic context for allergy management within the academy. The following chapters translate these principles into detailed operational arrangements covering roles and responsibilities, healthcare planning, risk assessment, prevention, emergency response, monitoring and continuous improvement.

Chapter 2: Governance, Leadership, Roles and Responsibilities

2.1 Introduction

Effective allergy management depends upon clearly defined roles and responsibilities across the whole school community. While the Board of Trustees provides strategic oversight, successful implementation requires leadership, staff, parents, pupils and external professionals to work together. This chapter defines those responsibilities and establishes clear lines of accountability.

2.2 Board of Trustees

The Board of Trustees has overall responsibility for ensuring that appropriate arrangements are in place for the management of allergies and anaphylaxis. Governors should approve this policy, receive regular assurance reports, monitor compliance with statutory requirements and ensure sufficient resources are available for training, emergency medication, risk management and policy implementation.

2.3 Headteacher

The Headteacher has operational responsibility for implementing this policy. This includes ensuring that procedures are embedded across the school, appropriate staff training is delivered, Individual Healthcare Plans are maintained, emergency arrangements are tested and incidents are reviewed to identify learning and improvement opportunities.

2.4 Senior Leadership Team

Senior leaders should ensure allergy management is integrated into safeguarding, health and safety, educational visits, curriculum planning, catering arrangements, premises management and wider school improvement planning. They should monitor compliance and provide regular reports to governors.

2.5 SENDCo and Pastoral Leaders

The SENDCo and relevant pastoral leaders should coordinate support for pupils whose allergies affect educational participation, ensuring Individual Healthcare Plans remain current, reasonable adjustments are considered where appropriate and effective communication is maintained with families and external professionals.

2.6 Teaching and Support Staff

All members of staff are responsible for following this policy, understanding the needs of pupils in their care, recognising the signs of allergic reactions, responding promptly in an emergency

and participating in required training. Staff should contribute to risk assessments and report concerns or incidents without delay.

2.7 Catering, Office Staff and Site Team

Catering staff should maintain robust allergen management procedures and communicate clearly regarding food ingredients. Administrative staff should support the maintenance of healthcare records, medication documentation and communication with families. The site team should consider allergy risks during maintenance, cleaning and contractor management where relevant.

2.8 Parents, Carers, Pupils and Visitors

Parents and carers are expected to provide accurate medical information, supply prescribed medication where required and notify the school of changes to their child's medical needs. Pupils should be encouraged, in an age-appropriate way, to understand and communicate their own allergy needs. Visitors and contractors are expected to comply with school procedures and any instructions relating to allergy safety.

2.9 External Agencies

The school will work collaboratively with healthcare professionals, local authority services and emergency services where appropriate. Clinical advice should inform Individual Healthcare Plans and significant changes to pupil support arrangements.

2.10 Governance Assurance

Role	Key assurance evidence
Trustees	Annual compliance report and policy review
Headteacher	Implementation and incident reporting
SLT	Monitoring and audit outcomes
SENDCo	Healthcare Plan reviews
Staff	Training and competency records
Parents	Updated medical information

2.11 Summary

Clear governance, effective leadership and shared responsibility are essential to maintaining a safe learning environment for pupils with allergies. The next chapter explains how the school identifies pupils with allergies, develops Individual Healthcare Plans and manages risk across everyday activities, educational visits and wider school life.

Chapter 3: Identification of Pupils with Allergies, Individual Healthcare Plans and Risk Assessment

3.1 Purpose

Early identification and effective planning are fundamental to preventing allergic reactions and ensuring that pupils with allergies can participate safely in school life. This chapter sets out the academy's arrangements for identifying pupils with allergies, maintaining Individual Healthcare Plans (IHPs) and undertaking proportionate risk assessments.

3.2 Identification of Pupils

Information regarding allergies should be obtained during admission, transition, annual data collection and whenever a parent or healthcare professional notifies the school of a change. All reported allergies should be verified, recorded and communicated to relevant staff in accordance with data protection requirements.

Statutory Requirement: The school should maintain accurate and up-to-date records of pupils with allergies and ensure relevant staff have timely access to essential medical information.

3.3 Allergy Register

The Headteacher should ensure that an allergy register is maintained and reviewed regularly. The register should identify pupils with diagnosed allergies, prescribed emergency medication, known allergens, emergency contacts and the location of medication. It should be reviewed whenever circumstances change and at least annually.

3.4 Individual Healthcare Plans

An Individual Healthcare Plan should be developed for pupils whose allergy requires ongoing management within school. Plans should be prepared in partnership with parents and, where appropriate, healthcare professionals. They should clearly describe known allergens, symptoms, preventative measures, emergency procedures, prescribed medication and any reasonable adjustments required.

3.5 Review of Healthcare Plans

Healthcare Plans should normally be reviewed annually and immediately following any significant allergic reaction, change in medical advice or alteration to prescribed medication. Reviews should be documented and communicated to relevant staff.

3.6 Risk Assessment

Risk assessments should consider the likelihood of allergen exposure and the potential consequences for the individual pupil. Assessments should be proportionate and reflect classroom activities, dining arrangements, educational visits, practical lessons, sporting activities, wraparound care and emergency evacuation procedures.

Best Practice: Risk assessments should focus on practical control measures that enable participation rather than creating unnecessary barriers to learning.

3.7 Educational Visits and Off-site Activities

Visit leaders should ensure that allergy risks are considered during planning and that emergency medication, trained staff and communication arrangements are available throughout the visit. Individual risk assessments should be reviewed where activities present additional hazards.

3.8 Communication and Information Sharing

Relevant information should be shared with staff who need it to safeguard pupils while respecting confidentiality. Supply staff, volunteers and contractors should receive appropriate information where it is necessary for the safe delivery of their duties.

3.9 Monitoring and Governance Assurance

Monitoring activity	Evidence
Allergy register review	Updated register and audit trail
Healthcare Plan review	Signed and dated IHPs
Risk assessments	Current assessments for activities and visits
Communication	Staff briefings and induction records
Trustee oversight	Annual compliance report

3.10 Chapter Summary

By identifying pupils promptly, maintaining accurate Healthcare Plans and implementing proportionate risk assessments, the academy can minimise avoidable risks while supporting inclusion. Chapter 4 explains the practical arrangements for prevention, food management, medication, emergency response, educational visits and staff training.

Chapter 4: Prevention, Medication, Emergency Response and Staff Training

4.1 Purpose

This chapter sets out the operational arrangements that reduce the risk of allergen exposure, ensure emergency medication is available and establish a consistent response to allergic reactions. The emphasis is on prevention, preparedness and continual improvement rather than reliance on emergency intervention.

4.2 Preventing Allergen Exposure

The school will implement proportionate control measures based on individual risk assessments. These may include classroom adaptations, supervision of younger pupils, cleaning arrangements, consideration of curriculum activities and appropriate communication with parents, catering staff and visitors. Whole-school bans on particular foods will only be considered where supported by an evidence-based risk assessment and leadership decision.

Best Practice: Preventative measures should support inclusion and avoid unnecessary restrictions while reducing foreseeable risks.

4.3 Food Management and Catering

Where food is prepared or served, robust allergen management procedures should be followed. Catering providers should maintain accurate ingredient information, minimise cross-contamination where reasonably practicable and communicate effectively with pupils and families regarding allergens. Staff organising food-related events should consider the needs of pupils with allergies during planning.

4.4 Medication Management

Prescribed medication should be stored safely, remain readily accessible during the school day and accompany pupils on educational visits where required. Expiry dates should be monitored routinely and replacement medication requested from parents in sufficient time. Medication should only be administered by appropriately trained staff in accordance with the pupil's Individual Healthcare Plan and current school procedures.

4.5 Adrenaline Auto-Injectors (AAIs)

Pupils prescribed adrenaline auto-injectors should have immediate access to their medication. Staff expected to respond to emergencies should receive training in recognising anaphylaxis and administering an AAI. Where permitted by current national guidance and school procedures, emergency spare AAIs may be held for use in accordance with statutory requirements.

Statutory Requirement: Emergency medication arrangements should reflect current Department for Education guidance and any applicable medicines legislation.

4.6 Emergency Response

Any suspected anaphylactic reaction must be treated as a medical emergency. Staff should follow the pupil's Individual Healthcare Plan, administer prescribed emergency medication where indicated, call emergency services without delay and inform parents or carers as soon as practicable. Following the incident, the school should undertake a structured review to identify lessons learned and update risk assessments or Healthcare Plans where appropriate.

4.7 Educational Visits and Residential Activities

Visit leaders must ensure that allergy risks are considered during planning. Medication, trained staff, emergency contact information and communication arrangements should remain available throughout the visit. Residential providers and external venues should be informed of relevant medical needs before the visit takes place.

4.8 Staff Training and Competence

All staff should receive appropriate allergy awareness training as part of induction and refresher training. Staff with specific responsibilities should receive additional practical training in recognising allergic reactions, administering emergency medication and implementing Individual Healthcare Plans. Training records should be retained and monitored by senior leaders.

4.9 Incident Reporting and Learning

All allergic reactions, medication errors and significant near misses should be recorded and reviewed. Investigations should identify contributory factors, evaluate the effectiveness of existing controls and recommend improvements to policy, training or operational procedures.

4.10 Governance Assurance

Monitoring activity	Evidence for governors
Medication audits	Storage and expiry checks
Training	Current competency records
Emergency readiness	Drills and equipment checks
Incident review	Completed investigations and actions
Catering assurance	Allergen management procedures
Policy implementation	Annual compliance report

4.11 Chapter Summary

Effective prevention, competent staff, accessible medication and a rehearsed emergency response provide the operational foundation of allergy safety. The final chapter explains how the Board of Trustees monitors implementation through audit, review, continuous improvement and supporting appendices.

Chapter 5: Monitoring, Review, Governance Assurance and Appendices

5.1 Purpose

This chapter establishes how The Coppice Primary School will monitor, evaluate and continuously improve its allergy management arrangements. Effective governance requires regular assurance that policy commitments are translated into safe day-to-day practice and remain aligned with current legislation, statutory guidance and professional standards.

5.2 Monitoring and Quality Assurance

Senior leaders should implement a planned programme of monitoring that reviews compliance with this policy, evaluates the effectiveness of risk controls and identifies opportunities for improvement. Monitoring activities may include audits, learning walks, sampling of Individual Healthcare Plans, medication checks, staff discussions and review of incident records.

5.3 Board of Trustees Oversight

The Board of Trustees should receive an annual allergy management report summarising policy implementation, training, incidents, audit outcomes, healthcare plan compliance and recommendations for improvement. Governors should use this information to challenge leaders constructively and to ensure adequate resources remain available.

Governance Assurance: Annual reports should identify trends, recurring issues, actions completed and any strategic risks requiring governor attention.

5.4 Policy Review

This policy should be reviewed annually or sooner where legislation, statutory guidance, clinical advice or local circumstances change. Interim reviews should follow any significant allergic reaction, serious incident or learning identified through internal investigation.

5.5 Equality, Inclusion and Continuous Improvement

The school is committed to ensuring that pupils with allergies are able to participate fully in education. Monitoring should therefore consider both safety outcomes and inclusion, ensuring that control measures remain proportionate and do not create unnecessary barriers to learning. Feedback from pupils, parents, staff and healthcare professionals should inform continuous improvement.

5.6 Records and Document Retention

Records relating to Individual Healthcare Plans, training, medication audits, incidents and policy reviews should be retained in accordance with the school's records management arrangements and applicable data protection requirements. Accurate documentation supports safeguarding, accountability and organisational learning.

5.7 Complaints and Escalation

Concerns regarding allergy management should be addressed promptly through normal school procedures. Where issues cannot be resolved informally, they should be managed through the school's published complaints procedure, while safeguarding concerns should be escalated immediately through established safeguarding processes where appropriate.

5.8 Governance Audit Checklist

Audit question	Evidence
Is the policy current?	Approved review record
Are Healthcare Plans up to date?	Signed and dated plans
Have staff completed training?	Training matrix
Is medication in date and accessible?	Medication audit

Are incidents reviewed?	Investigation reports
Are Trustees receiving assurance?	Annual Board of Trustees reports

5.9 Supporting Appendices

The following appendices should accompany this policy:

- Individual Healthcare Plan template
- Allergy Risk Assessment template
- Annual Governor Allergy Audit
- Staff Training Matrix
- Incident and Near Miss Report Form
- Emergency Response Flowchart
- Annual Policy Review Checklist

Best Practice: Appendices should be reviewed alongside the policy to ensure documentation remains aligned with current legislation, statutory guidance and school procedures.

5.10 Chapter Summary

This chapter completes the governance framework by establishing clear arrangements for monitoring, assurance and continual improvement. Together with the preceding chapters, it provides a coherent whole-school approach to allergy management that supports safeguarding, inclusion and effective governance.

6.Data Protection Statement:

The procedures and practice created by this Policy have been reviewed in the light of our GDPR Data Protection Policy. All data will be handled in accordance with the School's GDPR Data Protection Policy:

Name of Policy	Content	Reason for Policy	Who does it relate to?	Where is it stored?
Allergy and Anaphylaxis Policy	Guidelines for staff in relation to the day-to-day	To ensure staff follow the guidelines	All staff	Network drive

	management of allergies			

As such, our assessment is that this Policy:

Has Few / No Data Compliance Requirements	Has A Moderate Level of Data Compliance Requirements	Has a High Level of Data Compliance Requirements
		✓

Allergy Management Implementation: Operational Forms and Governance Toolkit

This toolkit accompanies the Allergy Management and Anaphylaxis Policy. Each form is fully editable and intended for operational use.

Appendix 1: Whole-School Allergy Register

Pupil	Class	Allergen(s)	Medication	Storage	Review

Appendix 2. Individual Healthcare Plan Register

Pupil	IHP Date	Review Due	Parent	Lead Staff

Appendix 3. Allergy Risk Assessment

Area/Activity	Hazard	Controls	Further Action	Owner	Review

Appendix 4: Adrenaline Auto-Injector Audit

Pupil	Device	Expiry	Location	Monthly Check

Appendix 5:Medication Audit Log

Date	Location	Medication	Expiry	Action

Appendix 6: Staff Training Matrix

Staff	Role	Awareness	AAI	First Aid	Refresh Due

Appendix 7: Educational Visit Checklist

Visit	Medication	Trained Staff	Emergency Plan	Complete

Appendix 8: Allergy Incident Investigation

Date	Pupil	Incident	Root Cause	Actions	Closed

Appendix 9: Governor Compliance Audit

Standard	RAG	Evidence	Action	Owner

Appendix 10: Annual Compliance Checklist

Requirement	Compliant	Evidence	Action

Appendix 11: Annual Governor Report Template

Measure	Current Year	Previous Year	Comment

Appendix 12: Emergency Action Poster

1. Recognise signs of an allergic reaction.
2. Follow the Individual Healthcare Plan.
3. Administer adrenaline auto-injector immediately if indicated.
4. Call 999 – state 'Anaphylaxis'.
5. Send someone to meet the ambulance.
6. Contact parents/carers.
7. Record the incident and review the Healthcare Plan and risk assessment.