



## **ALLERGY AND ANAPHYLAXIS POLICY**

**This policy includes the Early Years Foundation Stage (EYFS)**

***Policy created: 10<sup>th</sup> February 2026***

***Policy to be reviewed: 9<sup>th</sup> February 2028***

### **Introduction**

Allergy occurs when the immune system reacts to a usually harmless substance by producing histamine, triggering an allergic reaction. While many reactions are mild, some can be severe and lead to anaphylaxis, a life-threatening medical emergency. Serious reactions are most commonly caused by foods, insect venom, latex and medication. Allergic disease is the most common chronic condition in childhood, with one or two children in every class of 30 affected by food allergy. Even mild reactions or near-misses can have significant consequences. Allergies may also be considered a disability under the Equality Act, meaning schools must ensure their arrangements align with Diversity, Equity and Inclusion or Equal Opportunities policies.

The Designated Allergy Lead, the School's Senior Management Team and Governors are responsible for ensuring the policy is up-to-date, remains fit for purpose and is implemented.

The Operations Manager is the Designated Allergy Lead and the Chair of the General Purposes Committee is the Governor responsible.

This policy outlines St Wystan's School 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 should an allergic reaction occur. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside the First Aid Policy.

St Wystan's School takes a whole-school approach to allergy management.

### **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.

## **THE SCHOOLS ALLERGY CODE**

Please find in Appendix A

## **DEFINITIONS**

Please find in Appendix B

## **Admissions**

The admissions lead is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead and /medical lead to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity. This should be in place before a school visit, an Open Day or Taster Days if food is offered or likely to be eaten;
- There is a clear structure in place to communicate this information to the relevant parties (i.e. catering team);
- Parents and applicants are informed of catering arrangements during admission events; and;
- Plans are made for emergency medication if the child is to be left without parental supervision.

## **All staff**

All school staff, including teaching staff, support staff, occasional staff (for example sports coaches, music teachers and those running breakfast and afterschool clubs 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 the activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication or carrying it on their behalf;
- 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 allergy lead and;
- Ensuring that pupils have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site, for a match or trip, school event etc.

### **All parents**

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

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies;
- 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, birthday cakes or for fundraising events;
- Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice; and
- Encouraging their child to be allergy aware.

#### **Parents of children with allergies**

In addition to above, the parents and carers of children with allergies should:

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action 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;
- Ensure sufficient medication is available during residential trips;
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too;
- Provide the school with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management; and
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring eg. not eating the food to which they are allergic.

### **All pupils**

All pupils at the school should:

- Be allergy aware;
- Understand the risks allergens might pose to their peers and respect measures to support them;
- Learn how they can support their peers and be alert to allergy-related bullying;

- Older pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency; and
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- Adhere to food restriction and guidance about the food they bring to School, if they are deemed old enough to check ingredients themselves.

All of the above will be done in an age and capability appropriate way.

### **Pupils with allergies**

Pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk, this will depend on age and capability;
- Avoiding their allergen as best as they can;
- Understanding the importance of following the school specific processes of lunch and snack services and how that mitigates risk;
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- Carrying two adrenaline auto-injectors with them at all times, if age and capability appropriate. They must only use them for their intended purpose;
- Understanding how and when to use their adrenaline auto-injector;
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy;
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies;
- If age and capability appropriate, ensuring they have their medication with them on the journey to and from school.

### **Register of pupils with an allergy**

The school has a register of pupils who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.

Each pupil has their own Allergy Action Plan. This is stored on Sharepoint with medical information and displayed in the School kitchen. [Allergy action plans](#)

### **ASSESSING RISK**

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking;
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk;
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, the activity should be adapted. The School will ensure compliance with the Equality Act 2010.

### **Catering in school**

The school is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence is carried out with regard to allergen management when appointing catering staff;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- At Wystan's adheres to new [Early Years Foundation Stage statutory guidance](#). The "Safer Eating" section has the relevant information for allergies;
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- The catering team will endeavour to provide varied meal options to students and staff with allergies;
- The school has robust procedures in place to identify pupils with food allergies, food is individually labelled for these pupils and due to the nature of the school, all pupils are known to the catering staff.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Where changes are made to the ingredients this will be communicated to pupils with dietary needs by the Head Cook;
- Food provided at breakfast club and after school club will follow these procedures
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### **Food brought into school**

- St Wistan's School is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food;
- All food coming onto school premises or taken on a school trip etc, should be checked to ensure nuts are not an ingredient in another product. The labels on all foods brought in should be checked.

### **EDUCATIONAL VISITS AND SPORTS FIXTURES**

1. Staff leading the trip will have a register of pupils with allergies and details of their medication. Staff should notify the trip leader of any allergies;
2. Allergies will be considered on the risk assessment and catering provision put in place;
3. Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
4. Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction;
5. Allergens will be clearly labelled on catered packed lunches. All packed lunches are clearly labelled with the allergens and the pupils name.

## **INSECT STINGS**

Those pupils with a known insect venom allergy should:

- Avoid walking around in bare feet or sandals when outside and when possible keep arms and legs covered;
- Avoid wearing strong perfumes or cosmetics; and
- Keep food and drink covered.

The school Operations Manager and caretaker will monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds, and staff on duty should ensure boundaries are put in place to avoid them.

## **ANIMALS**

Normally the dander ([flakes](#) of skin), saliva or urine causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic;
- If an animal comes on site a risk assessment will be done prior to the visit;
- Areas visited by animals will be cleaned thoroughly;
- Anyone in contact with an animal will wash their hands after contact;
- If an animal lives on site, pupils, parents and staff will be made aware and consideration and adaptations will be made; and
- School trips that include visits to animals will be carefully risk assessed.

## **ALLERGIC RHINITIS/ HAY FEVER**

Pupils with hay fever are known to staff and this information is recorded with the pupil's medical information, which is available to all staff. Parents are welcome to bring in medication to help with the symptoms of hay fever and this is administered in line with our first aid and administering medication policy.

## **INCLUSION AND MENTAL HEALTH**

2. Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying;
3. No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip;
4. Pupils with allergies may require additional pastoral support, including regular check-ins, from their Form teacher;
5. Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives; and
6. Bullying related to allergy will be treated in line with the school's anti-bullying policy.

## **ADRENALINE PENS**

[See the government guidance on Adrenaline Pens in Schools.](#)

### **Storage of adrenaline pens**

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times;
- This bullet point needs a tweak, in line with what we do. Spot checks will be made to ensure adrenaline pens are where they should be and in date;
- Adrenaline pens must not be kept locked away;
- Adrenaline pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator); and
- Used or out of date pens will be disposed of in the same manner as sharp objects.

### **Spare adrenaline pens**

This school has 0 spare adrenaline pens to be used in accordance with government guidance.

The locations of spare adrenaline pens are clearly signposted. The allocated place is in the medical first aid cupboard near the kitchen.

The Operations Manager is responsible for:

- Deciding how many spare pens are required;
- What dosage is required, based on the Resuscitation Council UK's age-based guidance (see page 11);
- Which brand(s) to buy. Schools are recommended to buy a single brand if possible to avoid confusion;
- The purchasing of spare adrenaline pens which can be obtained at low cost from a local pharmacy. See government guidance above; and
- Distribution around the site and clear signage.

### **Adrenaline pens on off-site activities**

1. No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them;
2. Adrenaline pens will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms;
3. Adrenaline pens will be protected from extreme temperatures;
4. Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and
5. Staff should consider whether to take spare adrenaline pens to off-site activities. This should be recorded as part of the risk assessment process. This makes me nervous as we would be taking the spares off site but they could be needed in school.

### **RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS**

See appendix on recognising and responding to an allergic reaction

If a pupil has an allergic reaction:

1. Treat the pupil in accordance with their Allergy Action Plan;
2. If anaphylaxis is suspected administer adrenaline without delay;
3. Treat the pupil where they are. Lie them down with their legs raised and bring medication to them;
4. Use pupil's own prescribed medication if immediately available;

5. 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;
6. If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen;
7. 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. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life;
8. 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;
9. Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
10. 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 or guardian arrives.

## **TRAINING**

The school is committed to training all staff annually to give them a good understanding of allergy.

This includes:

- Understanding what an allergy is;
- How to reduce the risk of an allergic reaction occurring;
- How to recognise and treat an allergic reaction, including anaphylaxis (using an auto injector is covered during First Aid training);
- How the school manages allergy, for example, documentation, communication etc;
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;

## **ASTHMA**

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions. Parents are requested to update medical information annually and to ensure staff are advised of any medication needs. Inhalers are kept locked with medication and are taken with pupils when offsite on trips or fixtures.

## **POLICY DEVELOPMENT AND REVIEW**

This policy document was produced in consultation with the entire school community, including school staff and Governors.

Reviewed by	Operations Manager		
Date Reviewed	9 <sup>th</sup> February 2026		
Date of Next Review	10 <sup>th</sup> February 2028		
Governing Body Approval	Yes/No	Signed/Dated	
Website/App	Yes/No	ISI	Yes/No
Staff Handbook	Yes/No	Parent Handbook	Yes/No

## **Appendix A**

### **Schools Allergy Code**

<https://share->

[eu1.hsforms.com/1DKkT9V6BSmaqXEOMvPEYvgfj8h3https://allergyteam.sharepoint.com/:w:/g/EYQsoI0GR9JMqjOWv6vd0\\_MBNfM6gYFKS4d3gEylkzD0og](https://share-eu1.hsforms.com/1DKkT9V6BSmaqXEOMvPEYvgfj8h3https://allergyteam.sharepoint.com/:w:/g/EYQsoI0GR9JMqjOWv6vd0_MBNfM6gYFKS4d3gEylkzD0og)

## **Appendix B**

### **DEFINITIONS**

**ANAPHYLAXIS:** Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

**ALLERGEN:** A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by UK law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

**ADRENALINE AUTO-INJECTOR:** Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAI's, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen.

**ALLERGY ACTION PLAN:** This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.

**DESIGNATED ALLERGY LEAD:** The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff.

**NEFFY:** Neffy (official name in the UK is EURNeffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector approved.

**INDIVIDUAL HEALTHCARE PLAN:** A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

**RISK ASSESSMENT:** A detailed document outlining an activity, the risks it poses and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.

**SPARE ADRENALINE PENS:** Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline