



Oxford Diocesan Bucks Schools Trust (ODBST)



Allergy Policy

ODBST Statutory Policy:	This policy applies to all ODBST schools and sets out the Trust's requirements, expectations and statutory responsibilities. Schools must not amend the policy itself. Where local information is required, this must be recorded within the associated School Appendix or Local Procedure document. The Trust Board is responsible for approving and reviewing this policy. Schools will be notified of updates and review dates as necessary. Local Governing Bodies will note adoption and monitor implementation within their school.
Other related ODBST policies and procedures:	Health and Safety policy Supporting pupils with medical conditions policy
Committee responsible:	FRAPP
Approved by:	FRAPP
Date Approved:	June 2026
Review Date:	June 2027

Allergy Policy

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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

2. Legislation and guidance

This policy is based on the Department for Education (DfE) 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

Read the school website to identify who is the nominated Allergy at school.

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 (although the Allergy lead has ultimate responsibility, the information collection itself may be delegated to the school Medical Officer/administrative 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
- Ensuring there is the correct stock of adrenaline auto-injectors (AAIs) in school and positions correctly for rapid access

3.2 First Aid Lead – Mrs Miller

They are 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 the Trust 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
- 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. Therapy dogs will have risk assessments based on allergies as a cohort.

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
- Food is only to be consumed in dedicated areas, and any litter is to be disposed of in the appropriate locations.
- Daily cleaning in term time is undertaken.

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies. Outsourced catering providers must agree with our policies and requirements:

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view with ingredients 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
- Medical diet meals are available at every school.

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

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 on site
- Therapy dogs or similar therapy animals will stay in designated areas of the school.

5.6 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their teachers if required

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
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAI

➤ 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

The register is kept [in every classroom, the staffroom, the school office, the dining hall and the medical room] and can be checked quickly by any member of staff as part of initiating an emergency response

Allowing all pupils to keep their AAIs 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 approach to allergy awareness, all staff receive training on the school's allergic reaction procedures, including how to recognise the signs and symptoms of anaphylaxis and respond appropriately.
- Staff are trained in the administration of adrenaline auto-injectors (AAIs) to minimise delays in pupils receiving potentially life-saving treatment in an emergency.
- If a pupil experiences an allergic reaction, the member of staff present will follow the pupil's individual allergy action plan and initiate the school's emergency response procedures.
- Where an AAI is required, staff should administer the pupil's prescribed AAI. If this is not available, a school-held spare AAI should be used where appropriate.
- In an emergency, where a pupil is displaying signs and symptoms consistent with anaphylaxis, staff must not delay treatment whilst attempting to confirm a diagnosis or establish whether a known allergy exists.
- In accordance with current Department of Health and Social Care guidance, a spare AAI may be administered to a pupil who is believed to be experiencing anaphylaxis and where immediate treatment is considered necessary.
- Following the administration of an AAI, emergency services (999) must be called immediately, and the school's emergency procedures must be followed.
- If symptoms do not improve, or if they return after the first dose, a second AAI should be administered in accordance with the pupil's allergy action plan and current medical guidance.
- Parents/carers must be informed as soon as possible following any allergic reaction requiring emergency treatment.
- If the pupil does not have an allergy action plan, staff will follow the school's procedures for responding to allergic reactions and, where necessary, the school's normal emergency procedures.

The school's emergency procedures for suspected anaphylaxis are as follows:

Emergency procedures:

- Lay the child, young person, or staff member flat with their legs raised where possible to help maintain blood flow to the heart and other vital organs.
- If breathing is difficult, allow the person to sit up. Do not allow them to stand, walk, or suddenly change position.
- Administer the adrenaline auto-injector (AAI) immediately and record the time it was given.
- Call 999 immediately after administering the AAI and state that the person is experiencing anaphylaxis.
- If there is no improvement in symptoms after 5 minutes, or if symptoms worsen, administer a second AAI if one is available.
- Continue to monitor the person's breathing, circulation, and level of responsiveness until emergency services arrive.
- Do not leave the person alone and do not move them unnecessarily until help arrives, unless they are in immediate danger.

➤ 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 ODBST has procured a contact with Kitt Medical for the purchase of AAIs.

This provision ensures that each school has at least 1 set (2 pens) of both sizes of auto injectors, that are automatically replaced upon expiry or use. This is 4 pens in total.

The Allergy Lead is responsible for ensuring that the kit is hung in a suitable place; that used AAIs are reported immediately to Kitt Medical and that all staff are aware of the location.

Kits come with additional instructions inside to show how to use and which pen is suitable.

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs 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 AAIs will be kept separate from any pupil's own prescribed AAI and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAI's)

Kitt medical works with the Operations Co-Ordinator to ensure pens are replaced before expiry. Although the contract guarantees replacement, the operations co-ordinator is responsible for noting expiry dates and ensuring the agreement is upheld. If any pens are used, the operations co-ordinator must immediately report this to Kitt Medical who will arrange a replacement.

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.

7.5 Use of AAI's off school premises

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

7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAI's
- Instructions for the use of AAI's
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils prescribed AAI's, together with guidance for the emergency use of a spare AAI where a pupil is believed to be experiencing anaphylaxis.
- A record of when AAI's have been administered

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 AAI's are kept on the school site, and how to access them
- How to administer AAI's
- The wellbeing and inclusion implications of allergies

Training will be carried out annually using the Kitt Medical training system. 'Dummy pens' are also provided within the kit so staff members can familiarise themselves with the process of using AAI's.