



ST LAWRENCE CATHOLIC PRIMARY SCHOOL

Allergy Safety Policy

September 2026

Policy Lead / Named Allergy Lead	Dagmara Januszevska
Approved by	Governing Body
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Purpose

To minimise the risk of pupils suffering an allergic reaction while at school or taking part in a school-related activity, and to ensure staff are prepared to recognise and respond promptly and effectively to allergic reactions and anaphylaxis.

1. Aims

At St Lawrence Catholic Primary School, we recognise that allergies can have a significant impact on the health, safety, wellbeing and inclusion of pupils. Our aim is to provide a safe, inclusive environment in which pupils with allergies can participate fully in school life.

- Reduce the risk of pupils being exposed to known allergens wherever reasonably practicable.
- Ensure appropriate procedures are in place to respond quickly and effectively to allergic reactions, including anaphylaxis.
- Ensure pupils with allergies are supported to participate fully in school life and are not disadvantaged because of their condition.
- Promote allergy awareness and understanding across the whole school community.
- Ensure staff understand their responsibilities in relation to pupils with allergies.
- Ensure safe storage, access and administration arrangements for prescribed and emergency Adrenaline Auto-Injectors (AAIs).
- Ensure allergy information is accurately recorded, appropriately shared and kept up to date.
- Ensure serious allergy-related incidents and near misses are recorded, reviewed and used to improve practice.

The school recognises that it is not possible to guarantee an entirely allergen-free environment. We will take reasonable and proportionate steps to reduce the risk of exposure and ensure appropriate emergency procedures are in place.

2. Legislation and Guidance

This policy has been developed with regard to the following legislation and statutory guidance:

- Children's Wellbeing and Schools Act 2026, including section 34 on allergy safety.
- Department for Education, Allergy safety in schools: statutory guidance (July 2026).
- Children and Families Act 2014, including section 100 and the allergy safety provisions inserted by the 2026 Act.
- Supporting pupils at school with medical conditions: statutory guidance.
- Food Information Regulations 2014 and subsequent amendments.
- Relevant Food Standards Agency guidance.
- Relevant Department of Health and Social Care guidance on emergency adrenaline devices.
- Relevant NHS guidance on allergic reactions and anaphylaxis.
- Relevant guidance from Anaphylaxis UK, Allergy UK and the British Society for Allergy and Clinical Immunology (BSACI).
- Equality Act 2010, where applicable.

The new statutory allergy safety requirements are commonly referred to as Benedict's Law, following the campaign for improved allergy safety in schools.

This policy should be read alongside the school's:

- Supporting Pupils with Medical Conditions Policy
- Health and Safety Policy
- First Aid Policy
- Safeguarding and Child Protection Policy
- Educational Visits Policy
- School food/catering procedures
- Medication Administration Procedures
- Behaviour and Anti-Bullying Policy

3. Understanding Allergy and Anaphylaxis

An allergy is a reaction of the body's immune system to a substance that is usually harmless. Reactions can range from mild symptoms to a serious, potentially life-threatening reaction called anaphylaxis.

Common allergens include, but are not limited to, peanuts, tree nuts, sesame, milk, egg, fish, shellfish, wheat, soya, latex, insect venom, medicines, pollen and animal dander.

Anaphylaxis can develop rapidly. Staff should be alert to airway, breathing and circulation symptoms and follow the pupil's Allergy Action Plan and the emergency procedure in this policy.

4. Roles and Responsibilities

4.1 Governing Body and Headteacher

- Ensure the school has a published Allergy Safety Policy and reviews it at least annually.
- Ensure the policy is made known within school, brought to the attention of pupils, parents/carers and people working at the school at least annually, and published on the school website.
- Ensure appropriate arrangements, resources and training are in place to meet the school's allergy safety duties.

4.2 Allergy Lead

The named Allergy Lead is Dagmara Januszevska. The Allergy Lead is responsible for:

- Overseeing the school's allergy safety arrangements and maintaining an up-to-date allergy register.
- Ensuring appropriate Individual Healthcare Plans (IHPs) and Allergy Action Plans are in place where required.
- Ensuring relevant staff have access to current allergy information.
- Coordinating allergy awareness and emergency response training.
- Overseeing the school's spare emergency AAls and checks.
- Ensuring appropriate arrangements are in place for trips, visits, clubs and activities.
- Monitoring serious incidents and near misses and ensuring lessons are acted upon.

- Coordinating the annual review of this policy and any earlier review following a significant incident or change in guidance.

4.3 Welfare / Office Staff

- Maintain medical and allergy information and liaise with parents/carers regarding medication.
- Ensure medication records are maintained and prescribed medication is checked regularly.
- Report medication that is missing, used or approaching expiry.
- Support the Allergy Lead with emergency medication arrangements and allergy information.

4.4 Teaching, Support, Lunchtime and Other Staff

- Know which pupils in their care have allergies and understand their individual needs.
- Know where prescribed medication and emergency AAls are stored.
- Recognise signs and symptoms of allergic reactions and anaphylaxis.
- Complete required allergy awareness and emergency response training.
- Follow IHPs, Allergy Action Plans and risk assessments.
- Consider potential allergens when planning lessons, food activities, celebrations, clubs and other activities.
- Report allergic reactions, serious incidents and near misses promptly.

4.5 Parents and Carers

- Inform the school on admission, or as soon as a diagnosis is made, of their child's allergy, previous serious reactions and prescribed medication.
- Provide an up-to-date Allergy Action Plan produced with an appropriate healthcare professional; BSACI plans are preferred where appropriate.
- Provide all prescribed medication required in school, including two AAls where prescribed. Parents/carers are responsible for monitoring the expiry dates of their child's medication, ensuring that it remains in date at all times, and providing replacement medication promptly before existing medication expires. Any medication that has expired, been used, damaged or is otherwise no longer suitable must be replaced without delay.
- Inform the school immediately of changes to allergies, medication or emergency arrangements.
- Provide appropriate dietary information and work with the school to develop and review an IHP where required

4.6 Pupils

- Pupils will be encouraged, in an age-appropriate way, to understand their allergy, recognise symptoms and tell an adult immediately if they feel unwell.

- Pupils will be taught not to share food, drinks, cutlery or food containers.
- Where appropriate and agreed, older or sufficiently competent pupils may take greater responsibility for carrying their own emergency medication, while staff remain prepared to assist.

5. Allergy Information, Allergy Action Plans and Individual Healthcare Plans

The school will maintain accurate and accessible information about pupils with diagnosed allergies. An IHP will be considered where a pupil's allergy has a functional impact in school or requires arrangements additional to or different from those made generally.

Where provided by a healthcare professional, an Allergy Action Plan will be held alongside the IHP. Allergy Action Plans function as individual emergency plans and should not be created by school staff.

Relevant information may include:

- Pupil's name and photograph.
- Known allergens.
- Previous allergic reactions or anaphylaxis.
- Symptoms and emergency procedures.
- Prescribed medication and AAI information.
- Location of medication.
- Additional precautions or reasonable adjustments.
- Arrangements for trips, clubs and activities.

Information will be shared with staff who need it to keep the pupil safe and handled in accordance with data protection requirements.

6. Risk Assessment and Prevention

The school will take reasonable and proportionate steps to reduce foreseeable allergen exposure. Individual risk assessments will be completed for pupils with allergies where appropriate, including for pupils newly joining the school or newly diagnosed.

Allergy risks will be considered for:

- Cooking, baking and food preparation.
- Science experiments.
- Art and craft activities.
- Animal handling.
- Educational visits and residential trips.
- Sporting and off-site activities.
- School celebrations, performances, cultural events and fundraising activities.
- Any other activity where allergen exposure is reasonably foreseeable.

Pupils with allergies will not be unnecessarily excluded. Reasonable adjustments or alternative arrangements will be considered to enable safe participation.

7. Food, Catering and Hygiene

All food businesses, including school caterers, must comply with applicable food information requirements, including providing information about the 14 regulated allergens.

- The school will maintain accurate information about pupils with dietary requirements and ensure this is communicated to catering staff.
- An up-to-date list of pupils with food allergies, including photographs where appropriate, will be available to relevant catering and welfare staff.
- Catering staff will receive appropriate allergy and food safety training and take reasonable measures to prevent cross-contamination.
- Parents/carers should liaise with the school regarding their child's dietary needs and any changes.
- Pupils will be reminded to wash hands before and after eating and after contact with animals or potential allergens.
- Food, drinks, cutlery, utensils and food containers must not be shared between pupils.
- Food-related activities, treats, celebrations and special events must be planned with known allergies in mind and parental engagement obtained where required.

7.1 Food brought into school

The school cannot guarantee an entirely allergen-free environment. To reduce risk, the school asks families and staff to follow the school's allergy-aware food arrangements and not knowingly bring high-risk foods identified by the school into shared settings. Food must not be shared between pupils.

Where a specific restriction is needed for an individual pupil, this will be communicated clearly and supported by an appropriate risk assessment. The school will not rely on a blanket 'allergen-free' claim as a substitute for robust allergy awareness and emergency procedures.

8. Inclusion, Wellbeing and Bullying

Having an allergy should not prevent a pupil from accessing the full range of educational and social opportunities available at St Lawrence Catholic Primary School.

- Lessons and curriculum activities.
- Clubs and wraparound activities.
- School meals.
- Educational visits and residential trips.
- Sporting activities.
- Productions, performances, celebrations and special events.

The school recognises that pupils with allergies may experience anxiety or worry and will provide appropriate pastoral support.

Allergy-related bullying, teasing, threats or deliberate exposure to an allergen will not be tolerated and will be managed under the school's Behaviour, Anti-Bullying and Safeguarding procedures.

Pupils will receive age-appropriate education about allergies, including the importance of not sharing food and of seeking adult help if someone appears to be having an allergic reaction.

9. Educational Visits, Residential and Sporting Activities

- Review relevant allergy information, IHPs and Allergy Action Plans before the visit.
- Complete appropriate risk assessments and consider catering and potential allergen exposure.
- Ensure prescribed medication and AAIs are taken and remain immediately accessible.
- Identify appropriately trained staff and ensure emergency procedures are understood.
- Inform venues or host schools of relevant allergy requirements where necessary.
- Make reasonable adjustments so pupils are not excluded solely because of their allergy.

For residential visits, additional consideration will be given to accommodation, catering and activities. Where appropriate, spare emergency AAIs may also be taken following a risk assessment while ensuring adequate emergency stock remains at school.

10. Responding to an Allergic Reaction

All staff will receive appropriate allergy awareness and emergency response training. Symptoms may include itching or hives, swelling, breathing difficulty or wheeze, persistent coughing, difficulty swallowing, dizziness or collapse, vomiting or abdominal pain, or sudden deterioration.

Anaphylaxis is a medical emergency. If anaphylaxis is suspected:

1. Administer adrenaline immediately using the pupil's prescribed AAI where available.
2. If the prescribed AAI is unavailable or not working, use a school spare emergency AAI where appropriate.
3. Call 999 immediately and state 'anaphylaxis'.
4. Keep the pupil where they are. Lay them flat with legs raised where possible; if breathing is difficult they may be allowed to sit up, but they must not stand or walk.
5. Stay with the pupil and monitor them continuously.
6. If symptoms have not improved after 5 minutes, administer a second AAI where available and appropriate.
7. If there are no signs of life, commence CPR if trained and follow emergency service instructions.
8. Contact parents/carers as soon as practicable.
9. The pupil must be assessed by emergency medical services and taken to hospital as directed.
10. Record and report the incident and review any lessons learned.

Adrenaline must not be delayed while waiting for an ambulance or while seeking parental consent.

If a pupil has both asthma and food allergy and develops sudden breathing difficulties, staff should consider anaphylaxis. An asthma reliever inhaler must not be used instead of adrenaline where anaphylaxis is suspected.

10.1 Mild allergic reactions

Mild reactions will be managed in accordance with the pupil's IHP and Allergy Action Plan. The pupil will not be left unattended and will be monitored closely. If symptoms worsen or signs of anaphylaxis develop, the emergency procedure above will be followed immediately.

11. Supply, Storage and Care of Prescribed Medication

All pupils prescribed emergency allergy medication must have it available while in school. For younger pupils, St Lawrence currently stores the pupil's emergency medication in the classroom first-aid bag so it is immediately accessible and normally within five minutes of the pupil.

The pupil's clearly labelled emergency medication container should include, as prescribed:

- Two AAls, where prescribed.
- An up-to-date Allergy Action Plan.
- Antihistamine, if included on the plan.
- Asthma inhaler, if included on the plan.

AAls must be stored at room temperature, protected from direct sunlight and extremes of temperature, and must not be locked away.

Parents/carers are responsible for supplying in-date prescribed medication. School staff will also check medication regularly and remind parents/carers where replacement is required.

Used AAls are single-use devices and will be handed to ambulance staff where possible or disposed of safely as clinical/sharps waste in accordance with school procedures.

12. School Spare Adrenaline Auto-Injectors (AAls)

St Lawrence Catholic Primary School holds spare AAls for emergency use. They may be used where a pupil is experiencing anaphylaxis and their own device is unavailable, cannot be administered or is not working, and in other circumstances permitted by current statutory guidance and emergency arrangements.

Spare AAls are stored in clearly labelled emergency anaphylaxis kits, are not locked away, and are accessible to staff.

Current emergency AAI locations:

- School Hall
- Entrance to the Junior Building
- El Camino building
- Welfare room

The school currently holds four spare pens. The Allergy Lead/Welfare team will maintain a separate emergency AAI record identifying the brand, dose/strength, expiry date and exact kit location, and will check the kits at least monthly.

Spare AAls will be stored in pairs where practicable and in locations that allow rapid access. They will be replaced following use or before expiry.

Emergency treatment must not be delayed while seeking parental consent.

13. Staff Training

All staff who are present when pupils are on the school site, including teaching, support, office, welfare and lunchtime staff, will receive appropriate allergy awareness and emergency response training at least annually. New staff will receive appropriate information and training as part of induction.

Training will cover:

- Understanding allergies, common allergens and anaphylaxis.
- Recognising mild allergic reactions and anaphylaxis, including airway, breathing and circulation symptoms.
- Understanding the relationship between asthma and anaphylaxis.
- Reducing the risk of allergen exposure and cross-contamination.
- Knowing where pupil allergy information, prescribed medication and spare AAls are located.
- Administering AAls, including practical familiarisation with trainer devices.
- Following individual plans and emergency procedures.
- Reporting serious incidents and near misses.

The school will maintain records of allergy training and provide additional training where a pupil's needs change or where an incident identifies a training need.

14. Serious Incidents and Near Misses

The school will record and learn from serious allergy-related incidents and near misses. Examples of near misses include incorrect allergen information, potential cross-contamination identified before consumption, a pupil being offered a known allergen, an AAI being inaccessible or out of date, or an error in an allergy record or IHP.

Following an incident or near miss, the school will:

1. Ensure the pupil is safe and receives appropriate medical treatment.
2. Record the incident or near miss.
3. Inform the Allergy Lead and Headteacher as appropriate.
4. Inform parents/carers where appropriate.
5. Review what happened and identify lessons learned.
6. Review risk assessments, IHPs, procedures or training where necessary.
7. Implement and monitor actions arising from the review.
8. Make any external report required by law or applicable reporting procedures.

Reviews will be learning-focused and aimed at strengthening systems and preventing recurrence.

15. Communication and Information Sharing

The school will work closely with parents/carers to ensure allergy information remains accurate and current. Relevant information will be shared with staff who need it to keep pupils safe, including teaching, support, lunchtime, welfare, office, catering, club and trip staff.

The Allergy Safety Policy will be published on the school website, made available to parents/carers and staff, included within relevant staff induction and training, and communicated to pupils in an age-appropriate way. The school will take steps at least annually to bring the policy to the attention of pupils, parents/carers and people who work at the school.

16. Monitoring and Review

The Allergy Lead will monitor implementation of this policy. The Governing Body will oversee allergy safety through its normal monitoring and governance arrangements.

This policy will be reviewed at least annually and sooner where:

- There is a significant change in legislation or national guidance.
- There is a serious allergic reaction or significant near miss.
- The school's emergency AAI arrangements change.
- A pupil's needs change significantly.
- School procedures require amendment.

Information from incidents, near misses, staff training and feedback from pupils and parents/carers will be used to improve allergy safety.

Appendix 1 - Emergency Allergy Response

SUSPECTED ANAPHYLAXIS

1. Give adrenaline immediately.
2. Call 999 and say 'anaphylaxis'.
3. Keep the pupil where they are and lay them flat with legs raised where possible. Do not allow them to stand or walk.
4. Send for the emergency kit / second AAI.
5. Stay with the pupil and monitor continuously.
6. If no improvement after 5 minutes, give a second AAI if available and appropriate.
7. Follow emergency services' instructions.
8. Contact parents/carers.
9. Record and report the incident and complete a review.

Remember: adrenaline should not be delayed. If anaphylaxis is suspected, act immediately.

Appendix 2 - Emergency AAI Record

Location	Brand	Dose / strength	Expiry date	Monthly check
School Hall				
Entrance to the Junior Building				
El Camino building				
Welfare room				

The live emergency AAI record should be updated whenever stock is replaced, used or moved.

Appendix 3 - Useful Sources

- Department for Education - Allergy safety in schools: statutory guidance (July 2026).
- Children's Wellbeing and Schools Act 2026.
- Anaphylaxis UK - Safer Schools and AllergyWise resources.
- Allergy UK - school allergy awareness resources.
- BSACI - paediatric Allergy Action Plans.
- Department for Education - Supporting pupils at school with medical conditions.
- NICE guidance on food allergy and anaphylaxis.