ALLERGY & ANAPHYLAXIS SAFETY

Version 1: Summer Term 2026

Review: Summer Term 2029 (or sooner of legislation changes before this date)

1. Purpose

To set out Trust-wide standards so that **allergies are managed safely**, **anaphylaxis is responded to immediately**, and pupils with allergies **fully participate** in school life. This policy reflects the **DfE's forthcoming statutory requirements** (consultation March 2026, for implementation from **September 2026**) and aligns with the **BSACI/Allergy UK/Anaphylaxis UK Model Policy**.

2. Scope

Applies to **all BDMAT academies and central services**, all staff (including supply and contractors), pupils, parents/carers, governors/LABs, and on-site caterers.

3. Legal and guidance framework

- **Children and Families Act 2014 (s.100)** and **DfE "Supporting pupils with medical conditions at school"** (in force; updates currently out for consultation to strengthen allergy safety).
- **DfE press notice (March 2026)**: proposals requiring **spare AAIs**, **all-staff training**, and a **published allergy policy** from Sept 2026 ("Benedict's Law").
- **Human Medicines (Amendment) Regulations 2017** and **DHSC guidance**: schools **may purchase and hold spare AAIs** for emergencies.
- **MHRA safety update (2023)**: two AAIs to be prescribed/carried and key emergency positioning/steps.
- **BSACI/Allergy UK/Anaphylaxis UK Model Policy for Schools** (DfE-supported).
- **Food Information Regulations 2014 & "Natasha's Law" (PPDS)**; **FSA guidance for schools, colleges and nurseries**.

4. Guiding principles

1. **Love in action:** a safe, dignifying culture for pupils with allergies.
2. **Inclusion:** equitable access to curriculum, trips, events, and meals.
3. **Preparedness:** trained staff, clear plans, accessible medication.
4. **Prevention first; swift response always.**
5. **Partnership:** with families, healthcare professionals, caterers.
6. **Continuous learning:** robust incident logging and review.

5. Roles and responsibilities

- Govenors approve this policy; monitor compliance; ensure funding for **training, spare AAIs, and catering controls**.
- **Headteachers / Heads of Centre:** appoint a **Named Allergy Lead** and a **Deputy** per setting; ensure **all-staff annual training** and **implementation**.
- **All staff:** complete annual training; know emergency procedures; **never delay adrenaline** if anaphylaxis suspected.
- **Catering lead / providers:** comply with **FIR 2014/Natasha's Law**, maintain **accurate allergen information**, and follow **cross-contamination controls**.
- **Parents/carers:** share medical/allergy information, supply **two in-date AAIs**, and collaborate on the **Allergy Action Plan/IHP**.

- **Pupils (age-appropriate):** understand their plan; carry AAIs as advised.

6. Identification, records and Individual Healthcare Plans (IHPs)

- On admission (and annually), schools collect allergy details and **create or update an IHP** incorporating a **clinically signed Allergy Action Plan** where available.
- IHPs specify **triggers, symptoms, medication, storage locations, supervision**, adaptations (e.g., dining), and **trip arrangements**.
- Copies of IHPs are available to relevant staff, catering, and trip leaders with **parental consent**, respecting data protection.

7. Preventive controls (whole-school)

- **Catering & food tech:**
  - Maintain **menu allergen matrices**; verify suppliers; check labels at **every delivery and recipe change**; keep **PPDS labels compliant** (full ingredients; allergens emphasised).
  - Manage **cross-contact** (segregation, utensils, cleaning, signage).
- **Classrooms / clubs / trips:** pre-check activities, materials and venues; have **AAIs and IHPs** to hand; brief supervising adults.
- **Whole-school approach:** tackle **bullying linked to allergy**; age-appropriate allergy education; consider **"safe zones"** (e.g., primary lunch tables) rather than blanket "nut-free" claims, unless clinically justified.

8. Medication: provision, storage and access

- **Parent-provided AAIs:** Pupils with known risk should have **two in-date AAIs available at all times** (on person for older pupils or in a clearly marked, quickly accessible kit for younger pupils).
- **Spare AAIs (school-held):** Each academy **must** (from Sept 2026) and **may** (already lawful) hold **spare AAIs** purchased without prescription, using the DHSC template letter; store centrally, **unlocked**, clearly labelled, reachable within **5 minutes**.
- **Checks:** Monthly checks of **expiry, condition, quantity**, with logs retained; immediately replace after use.

9. Training and drills

- **All-staff annual training** (induction + refresher) covering: recognising **mild/moderate vs anaphylaxis**, **ABC symptoms**, **positioning**, **calling 999 ("anaphylaxis")**, **using AAIs**, and **post-incident actions**.
- **Practical drills** termly (including dining hall scenarios), led by the Named Allergy Lead.
- Records kept of attendees, competencies, and next refresh dates.

10. Emergency response (suspected anaphylaxis)

1. **Lie child flat, legs raised** (sit up if breathing is difficult). **Give adrenaline immediately** using AAI. **If in doubt, give adrenaline.**
2. **Dial 999** (say "**anaphylaxis**"), send runner for **second AAI**, monitor ABC, **repeat AAI after 5 minutes** if no improvement.
3. **Do not leave the pupil;** commence CPR if required.
4. **Contact parents/carers** and complete incident records; debrief and update IHP.

11. Dining, PPDS and "Natasha's Law"

- Where the school produces **PPDS foods** (e.g., wrapped sandwiches made on site), labels **must** show **name of food + full ingredients list with allergens emphasised**; for **non-prepacked** foods, allergen information **must still be provided** (menu/notice or orally with clear process).
- Follow DfE's **Allergy guidance for schools** and FSA training/resources for caterers.

12. Inclusion and reasonable adjustments

- Adapt activities, seating, and supervision so pupils with allergies **fully participate** (class, clubs, trips, exams), consistent with Equality Act duties and DfE medical conditions guidance.

13. Recording, reporting, learning

- Maintain: **Allergy Register**, **IHPs**, **training logs**, **AIs stock logs**, **incident/near-miss reports**.
- After any incident/near-miss: **review within 5 school days**, update IHPs, adjust controls, and brief staff. *(DfE proposals emphasise strengthened reporting/learning.)*

14. Governance and assurance

- **Local Academy Boards** monitor termly; **Trust** receives an annual report (incidents, training coverage, stock checks, catering audits). This aligns with DfE's move to **standardise practice and accountability**.

15. Linked policies

- Supporting Pupils with Medical Conditions; Safeguarding; Behaviour/Anti-bullying; Educational Visits; First Aid/Health & Safety; Complaints; Data Protection; **Catering/Allergen Management**.

Appendices (ready-to-use)

A. Allergy Action Plan / IHP Template

Use these clinically-approved national templates (BSACI / Allergy UK / Anaphylaxis UK):
1. BSACI Allergy Action Plans (Food, Non-Food, Drug)
These are the gold-standard templates recommended for UK schools, health professionals and parents.
https://www.bsaci.org/resources/model-policy-for-allergy-management-at-school/

2. Allergy UK & Anaphylaxis UK Model Policy Pack (includes editable IHP template & Action Plans)
https://www.allergyuk.org/wp-content/uploads/2025/09/Model-Policy-for-allergy-at-school-v2.1-090124.pdf

B. Monthly AAI (Adrenaline Auto-Injector) Stock Check Log
Use these documents for storage, expiry checks and emergency readiness:
1. DHSC "Guidance on the use of AAIs in schools" (includes stock check expectations)

https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_

auto_injectors_in_schools.pdf

2. Anaphylaxis UK – Spare AAI Guidance (with practical checklists)
https://www.anaphylaxis.org.uk/education/essential-guidance-for-schools-on-using-spare-adrenaline-auto-injectors-aais/

3. Spare AAI FAQ Guide (NEL ICB)
https://primarycare.northeastlondon.icb.nhs.uk/wp-content/uploads/2023/08/AAI_School_Guide_FAQ.pdf

C. Training Record & Emergency Drill Checklist
These resources are accepted nationally for training logs and emergency procedures:
1. DfE "Supporting pupils with medical conditions" (training logs & emergency templates)
https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

2. Anaphylaxis UK Best Practice Guide (training + drill checklists)
https://www.anaphylaxis.org.uk/wp-content/uploads/2024/04/Allergy-in-schools-Best-Practice-Guide.pdf

D. Catering Allergen Controls & PPDS ("Natasha's Law") Checklist
1. FSA Natasha's Law / PPDS Requirements (schools, nurseries, colleges)
https://www.food.gov.uk/business-guidance/introduction-to-allergen-labelling-changes-ppds

2. DfE Allergy Guidance for Schools (menu changes, allergen control, PPDS)
https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools

E. Template Letter to Pharmacy for Spare AAIs
https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf