



BJS Federation of Schools

Allergy Safety Policy

Policy Owner: Governing Board

Federation Lead: Executive Headteacher

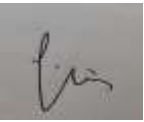
Date Adopted: Autumn 2026

Review Date: Autumn 2027

Review Frequency: At least annually and following any significant allergy-related incident or near miss

Signed  _____

Ms A. Parker, Executive Headteacher

Signed  _____

Ms F. Morris, Chair of Governors



1. Purpose

1.1 The BJS Federation of Schools is committed to providing a safe, inclusive and supportive environment for all pupils, staff and visitors with allergies.

We recognise that allergies can range from mild reactions to severe and potentially life-threatening anaphylaxis. Effective allergy management therefore requires a whole-school approach involving appropriate identification, risk management, staff training, emergency preparedness, communication and partnership with parents, carers and healthcare professionals.

This policy sets out how Bonneville, Jessop and Stockwell Primary Schools will:

- identify and support pupils with known allergies;
- reduce the risk of exposure to known allergens;
- ensure staff understand allergies and can recognise and respond to allergic reactions;
- ensure emergency medication can be accessed rapidly;
- support the inclusion and wellbeing of pupils with allergies;
- manage allergy risks during the school day and on educational visits;
- work effectively with parents, carers, catering providers and healthcare professionals; and
- learn from allergy-related incidents and near misses.

2. Statutory Context

2.1 This policy has been developed in accordance with the statutory guidance relating to allergy safety in education settings and the requirements of Section 34 of the Children's Wellbeing and Schools Act 2026.

It should be read alongside the Federation's policies and procedures relating to:

- Supporting Pupils with Medical Conditions;
- First Aid;
- Safeguarding and Child Protection;
- Health and Safety;
- Educational Visits;
- SEND;
- Behaviour and Anti-Bullying;
- Data Protection; and

3. Leadership and Governance

3.1 The Governing Board has overall responsibility for ensuring appropriate arrangements are in place for allergy safety across the Federation.

The Executive Headteacher will provide strategic oversight of the implementation of this policy.

Each school will nominate a **named member of the Senior Leadership Team as the Allergy Safety Lead**.



Bonneville: Martine Auton

Jessop: Kenneth Baffoe

Stockwell: Zenia McIntosh

The Allergy Safety Lead will be responsible for:

- overseeing implementation of this policy within their school;
- promoting an allergy-aware culture;
- ensuring appropriate records of pupils with allergies are maintained;
- ensuring Individual Healthcare Plans and Allergy Action Plans are in place where required;
- ensuring relevant information is communicated appropriately to staff;
- overseeing staff training;
- monitoring the availability and accessibility of emergency medication;
- working with catering staff and providers;
- ensuring allergy risks are appropriately considered in school activities and educational visits;
- reviewing allergy-related incidents and near misses; and
- contributing to the annual review of this policy and associated procedures.

All members of staff have a responsibility to understand and follow the school's allergy safety arrangements.

4. Creating and Allergy Aware Culture

4.1 The Federation will promote an environment in which allergy safety is understood as a shared responsibility.

We will encourage pupils and staff to understand that allergies are medical conditions that must be taken seriously.

Pupils will be encouraged to:

- respect the needs of those with allergies;
- follow school expectations relating to food and sharing;
- never deliberately expose another pupil to a known allergen;
- seek adult help immediately if another pupil appears unwell; and
- understand, in an age-appropriate way, why some pupils may need different arrangements.

The Federation will not tolerate bullying, teasing, intimidation or deliberate exposure to allergens.

Any deliberate attempt to expose a pupil to a known allergen will be treated seriously and addressed in accordance with the school's Behaviour Policy and, where appropriate, safeguarding procedures.



5. Staff Training

5.1 All staff will receive allergy awareness and emergency response training annually.

5.2 This includes permanent staff, temporary staff, supply teachers, agency staff, peripatetic staff, catering staff, regular volunteers and staff supervising breakfast clubs, after-school clubs and other pupil activities.

5.3 New staff will receive appropriate information about allergy safety as part of their induction.

5.4 Arrangements will also be made to ensure that supply and cover staff have access to the information they require to keep pupils safe.

5.5 Training will ensure staff understand:

- what allergies are and the risks they can present;
- that allergies can include food allergy, asthma, eczema, hay fever and other conditions;
- the difference between food allergy, food intolerance and coeliac disease;
- common signs and symptoms of an allergic reaction;
- how to recognise anaphylaxis;
- where information about individual pupils' allergies is held;
- how to follow an Allergy Action Plan or Individual Healthcare Plan;
- how to reduce the risk of exposure to known allergens;
- where emergency medication is located;
- how to administer emergency medication, including adrenaline auto-injectors (AAIs), where appropriate;
- when and how to contact emergency services and parents/carers;
- the potential emotional and wellbeing impact of living with an allergy; and
- how to report an allergy-related incident or near miss.

6. Identification of Pupils with Allergies

6.1 Parents and carers are responsible for informing the school of any known or suspected allergy affecting their child.

6.2 Information about allergies will be requested when a pupil joins the school and parents/carers are expected to inform the school promptly if:

- a new allergy is diagnosed;
- an existing allergy changes;
- medication changes;
- an Allergy Action Plan is updated; or
- other relevant medical advice is received.

6.3 Where appropriate, information will also be obtained from a pupil's previous school or setting.



6.4 Each school will maintain an up-to-date record of pupils with known allergies, including:

- the pupil's name;
- known allergen(s);
- nature and severity of the allergy;
- symptoms to look for;
- emergency response required;
- medication prescribed;
- location of medication;
- whether an Individual Healthcare Plan is required; and

whether an Allergy Action Plan and/or Asthma Action Plan is in place.

7. Individual Health Care Plans (Appendix 1)

7.1 A pupil with an allergy will have an Individual Healthcare Plan (IHP) where their allergy has a functional impact on them at school, places them at risk of harm and requires arrangements additional to or different from those ordinarily available.

7.2 The IHP will identify the reasonable adjustments, preventative arrangements and emergency procedures required to support the pupil safely.

7.3 Where a healthcare professional has provided an Allergy Action Plan and/or Asthma Action Plan, this should be referred to or attached to the pupil's IHP.

7.4 The IHP will be reviewed whenever significant information changes, including where an updated Action Plan is received.

8. Minimising Exposure to Allergens

8.1 The Federation will take reasonable and proportionate steps to reduce the risk of pupils, staff and visitors being exposed to their known allergens.

This may include:

- appropriate communication with catering providers;
- procedures for identifying pupils with food allergies;
- clear allergen information for food provided by the school;
- appropriate food preparation and serving arrangements;
- considering seating or supervision arrangements where necessary;
- appropriate cleaning of surfaces and equipment;
- handwashing before and after eating where appropriate;
- discouraging pupils from sharing food;
- considering known contact and airborne allergens;
- considering allergies when purchasing resources or planning activities; and
- completing individual risk assessments where necessary.

8.2 The school cannot guarantee an entirely allergen-free environment. Our approach is therefore to create an **allergy-aware environment**, supported by robust risk assessment and appropriate preventative measures.



9. Food Brought into School

9.1 Parents, carers, pupils and staff are expected to support the school's allergy safety arrangements.

9.2 Where particular food restrictions are necessary because of an identified risk, these will be clearly communicated to the relevant school community.

9.3 Pupils should not share or swap food.

9.3 Food must **not be brought into school by parents or carers for distribution to pupils**, including for birthdays, celebrations, fundraising activities or other events. This is necessary to support the safe management of allergies and reduce the risk of accidental exposure to allergens.

9.4 Where food is brought into school by staff for curriculum for an organised activity, consideration must be given to known allergies before it is distributed or consumed.

10. School Meals and Catering

10.1 The school will work with its catering provider to ensure appropriate systems are in place to manage food allergies.

This will include:

- sharing relevant allergy information appropriately;
- maintaining accurate allergen information;
- supporting the caterers to identifying pupils requiring alternative arrangements;
- ensuring catering staff understand relevant procedures; and
- distribute appropriate information regarding allergens in food provided by the supplier.

10.2 Parents/carers remain responsible for informing the school of their child's allergies and any changes to their medical needs.

11. Curriculum and School Activities

11.1 Staff planning activities must consider whether they could expose a pupil to a known allergen.

11.2 This includes, but is not limited to:

- cooking and food technology;
- science;
- art and craft;
- sensory activities;
- music;
- gardening;
- celebrations and cultural events;
- fundraising;
- food tasting;
- activities involving animals; and



- external visitors or workshops.

11.3 Where a known risk exists, appropriate adjustments or alternative materials will be identified before the activity takes place.

12. Adrenalin Auto Injectors

12.1 Pupils prescribed adrenaline auto-injectors must have rapid access to their medication.

12.2 Arrangements will ensure that prescribed AAIs can be accessed promptly throughout the school day, including when pupils are:

- in classrooms;
- eating lunch;
- in the playground;
- participating in PE or sport;
- attending before or after-school activities; and
- participating in educational visits.

12.3 Emergency medication must accompany the pupil when they leave the school site where required.

12.4 Parents/carers are responsible for providing prescribed medication in accordance with the school's medication procedures and for ensuring that the school is informed of any changes.

12.5 The school will have arrangements for monitoring expiry dates and parents/carers will be contacted where prescribed medication requires replacement.

13. Spare Adrenalin Auto Injectors

13.1 Where the school holds spare adrenaline auto-injectors, they will be managed in accordance with statutory requirements and relevant guidance.

Spare AAIs will:

- be readily accessible;
- not be locked away in a location that prevents rapid access;
- be clearly labelled as emergency/spare devices;
- be stored in pairs;
- be regularly checked to ensure they remain in date; and
- be replaced promptly following use or expiry.

13.2 The location of spare AAIs will be known to staff.

13.3 The school will ensure that emergency adrenaline can be brought to a person experiencing anaphylaxis within five minutes.

13.4 Where the size or layout of a school means this cannot reliably be achieved from one location, additional emergency kits will be provided as appropriate.



13.5 Spare AAIs will only be administered in accordance with the applicable legal requirements, parental consent arrangements and emergency procedures.

14. Emergency Response to Anaphylaxis

14.1 Anaphylaxis is a medical emergency.

14.2 Where anaphylaxis is suspected, staff must act immediately.

Staff should:

1. Follow the pupil's Allergy Action Plan where available.
2. Administer adrenaline without unnecessary delay where indicated.
3. Call **999** and state that anaphylaxis is suspected.
4. Ensure the pupil is appropriately positioned and supervised.
5. Administer a second adrenaline auto-injector where required in accordance with emergency guidance.
6. Arrange for the pupil's parents/carers to be contacted.
7. Ensure the pupil is transferred to hospital for medical assessment following suspected anaphylaxis, even if they appear to recover.
8. Record the incident in accordance with school procedures.

Emergency action must not be delayed while attempting to contact parents/carers.

15. Educational Visits, Residentials and Off-Site Activities

15.2 All pupils with allergies should be able to participate fully in educational visits and wider school activities wherever reasonably possible.

15.2 Allergy needs must be considered during the planning and risk assessment process.

For pupils at risk of anaphylaxis:

- an individual risk assessment will be completed where appropriate;
- prescribed adrenaline must accompany the pupil;
- staff supervising the visit must know which pupils have allergies;
- appropriate staff must understand the emergency arrangements;
- emergency medication must remain rapidly accessible;
- food and catering arrangements must be considered in advance;
- accommodation providers and external venues should be informed where appropriate; and
- emergency medical arrangements should be considered as part of visit planning.

15.3 A pupil should not ordinarily be prevented from participating in a visit solely because of their allergy where reasonable adjustments can enable safe participation.

16. Breakfast Clubs, After School Clubs and Extended Provision



16.1 The same principles of allergy safety apply to activities taking place before and after the formal school day.

16.2 Relevant staff must have access to appropriate allergy information and emergency arrangements.

16.3 Where provision is operated by an external organisation on school premises, appropriate allergy safety information and responsibilities will be agreed as part of the school's arrangements with the provider.

17. Staff and Visitors with Allergies

17.1 The Federation recognises that members of staff and visitors may also have serious allergies.

17.2 Staff are encouraged to inform the school of allergies that may require reasonable arrangements or an emergency response while at work.

17.3 Where the school is informed that a visitor has a significant allergy, reasonable and proportionate steps will be taken to minimise known risks.

18. Supporting Pupil Wellbeing

18.1 The Federation recognises that living with a serious allergy can affect a child's emotional wellbeing and may cause anxiety for both the child and their family.

18.2 We will seek to ensure that pupils with allergies:

- are included fully in school life;
- are not unnecessarily singled out;
- feel confident asking adults for help;
- are listened to regarding their own allergy management;
- are supported to develop age-appropriate independence; and
- are protected from bullying, teasing or deliberate exposure to allergens.

18.3 Reasonable adjustments will be considered to enable pupils with allergies to participate safely and confidently in school life.

19. Information Sharing and Confidentiality

19.1 Information about a pupil's allergy will be shared with those members of staff who need the information to keep the pupil safe.

19.2 Health information is special category personal data and will therefore be managed carefully and in accordance with UK GDPR and the Federation's Data Protection Policy.

19.3 Information will be shared proportionately and sensitively, recognising both the importance of keeping pupils safe and their right to privacy and dignity.

19.4 Where wider awareness among pupils would support a child's safety, this will be considered carefully and, where appropriate, discussed with the pupil and their parents/carers.



20. Incidents and Near Misses

20.1 All significant allergy-related incidents and near misses must be reported and recorded in accordance with school procedures.

This includes situations where:

- a pupil experiences an allergic reaction;
- anaphylaxis occurs or is suspected;
- emergency medication is administered;
- a pupil is accidentally exposed to a known allergen;
- medication is unavailable or inaccessible when required; or
- an incident occurs that could reasonably have resulted in harm.

20.2 The Allergy Safety Lead and appropriate senior leaders will review incidents and near misses to establish:

- what happened;
- whether procedures were followed;
- whether existing risk controls were sufficient;
- what lessons can be learned; and
- whether changes to procedures, training, risk assessments or this policy are required.

20.3 Parents/carers will be informed of incidents involving their child in accordance with school procedures.

21. Responsibilities of Parents and Carers

21.1 Parents and carers play an essential role in helping the school manage their child's allergy safely.

21.2 Parents/carers are expected to:

- provide accurate and current information about their child's allergy;
- notify the school promptly of changes;
- provide prescribed medication and replacement medication as required;
- provide current Allergy Action Plans and relevant medical information;
- ensure medication supplied to school is correctly labelled and in date;
- engage with the development and review of their child's IHP where required;
- support school arrangements intended to minimise allergy risks; and
- communicate concerns promptly to the school.

22. Responsibilities of Pupils

22.1 Taking account of their age and understanding, pupils with allergies will be encouraged to:

- understand their known allergens;
- avoid foods or substances they know may cause a reaction;
- not share food;



- tell an adult immediately if they feel unwell;
- know where their medication is kept;
- participate in discussions about their allergy arrangements; and
- develop increasing independence in managing their condition where appropriate.

22.2 No pupil will be expected to take responsibility beyond what is appropriate for their age, maturity and individual circumstances.

23. Responsibilities of Staff

23.1 All staff are expected to:

- undertake required allergy awareness training;
- familiarise themselves with relevant pupil allergy information;
- follow Individual Healthcare Plans and Allergy Action Plans;
- consider allergy risks when planning activities;
- take reasonable steps to prevent known allergen exposure;
- know how to access emergency medication;
- respond promptly to suspected allergic reactions;
- report incidents and near misses; and
- raise concerns where they believe existing arrangements may place a pupil at risk.

23.2 Allergy safety is a collective responsibility and is not limited to first aiders, medical staff or senior leaders.

24. Policy Awareness

24.1 This policy will be:

- published on each school's website;
- made available to parents/carers and staff;
- available in hard copy on request;
- included within relevant staff induction arrangements; and
- reinforced through annual allergy awareness training.

The Federation will also promote age-appropriate allergy awareness among pupils.

25. Monitoring and Review

25.1 This policy will be reviewed **at least annually** by the Federation.

It may be reviewed sooner where:

- there has been a serious allergic reaction;
- an allergy-related near miss has occurred;
- concerns have been identified about existing procedures;
- legislation or statutory guidance changes; or
- learning from an incident indicates that changes are required.

25.2 Reviews will take account of allergy-related incidents and near misses and identify any lessons that can strengthen practice across the Federation.



25.3 Where learning is relevant across all three schools, this will be shared to ensure consistent improvement across Bonneville, Jessop and Stockwell

26. Key Principle

26.1 The BJS Federation's approach can be summarised as:

Know the child. Know the allergen. Know the plan. Know where the medication is. Act immediately in an emergency.

26.2 Our aim is not simply to respond effectively when an allergic reaction occurs, but to create an informed, inclusive and allergy-aware culture in which risks are anticipated, reasonable precautions are taken and every child is able to participate safely and fully in school life.



THE BJS FEDERATION OF SCHOOLS

Individual Healthcare Plan (IHP)

School: ☐ Bonneville Primary ☐ Jessop Primary ☐ Stockwell Primary

CONFIDENTIAL – MEDICAL INFORMATION

1. Pupil Information

Pupil's full name: _____

Date of birth: _____

Year group/class: _____

Home address: _____

Medical condition/allergy: _____

Date of diagnosis (if known): _____

NHS/Hospital number (if applicable): _____

GP/Medical Consultant: _____

Hospital/Clinic: _____

2. Parent/Carer and Emergency Contacts

Parent/Carer 1

Name: _____

Relationship to pupil: _____

Telephone: _____

Alternative telephone: _____

Email: _____

Parent/Carer 2

Name: _____

Relationship to pupil: _____

Telephone: _____

Alternative telephone: _____

Email: _____

Additional emergency contact (if required):

Name: _____

Relationship to pupil: _____

Telephone: _____

3. Medical Condition / Allergy

Please provide a clear description of the pupil's medical condition or allergy:



Known allergen(s) / triggers:

Known signs and symptoms:

What may cause the condition/reaction to worsen?

Has the pupil previously experienced a severe reaction or medical emergency?

☐ Yes ☐ No

If yes, please provide relevant information:

4. Day-to-Day Management

How does this condition/allergy affect the pupil during the school day?

What support or adjustments are required?

Are there any activities the pupil needs additional support or adjustments to access safely?

- ☐ Classroom activities
- ☐ PE/Sport
- ☐ Lunchtime
- ☐ Breakfast/After-School Club
- ☐ Cooking/Food activities
- ☐ Science
- ☐ Art/Craft



- ☐ Educational visits
- ☐ Residential visits
- ☐ Other: _____

Details of required arrangements:

5. Allergy-Specific Arrangements

Complete where applicable.

Type of allergy:

- ☐ Food
- ☐ Medication
- ☐ Insect sting/bite
- ☐ Airborne allergen
- ☐ Contact allergen
- ☐ Other: _____

Specific allergen(s):

How should exposure be avoided or minimised?

Food/catering arrangements required:

Additional arrangements required for lunch/break times:

6. Medication

Name of medication: _____

Dose: _____

When should it be administered? _____

Method of administration: _____

Where is the medication stored? _____



Expiry date: _____

Is the pupil able to administer their own medication?

☐ Yes ☐ No ☐ With supervision

Does the pupil carry their own medication?

☐ Yes ☐ No

Adrenaline Auto-Injector (if prescribed)

AAI prescribed: ☐ Yes ☐ No

Device/type: _____

Dose: _____

Location of prescribed AAI: _____

Second AAI location: _____

Expiry date: _____

School spare AAI may be used where legally permitted and appropriate:

☐ Parent/carers consent obtained

☐ Not applicable

7. Emergency Action

IF THE PUPIL BECOMES UNWELL

Early signs/symptoms to look for:

Immediate action staff must take:

When should medication be administered?

When should 999 be called?

What information should be given to the ambulance service?

Additional emergency instructions:



In the event of suspected anaphylaxis:

- **ACT IMMEDIATELY – anaphylaxis is a medical emergency.**
 - Follow the pupil's Allergy Action Plan.
 - Administer the pupil's adrenaline auto-injector immediately where indicated.
 - Call **999** and state "**ANAPHYLAXIS**".
 - Follow emergency instructions and administer a second AAI where required.
 - Contact the pupil's parent/carer.
 - Do not leave the pupil alone.
 - The pupil must receive appropriate medical assessment following suspected anaphylaxis.
-

8. Allergy / Asthma Action Plan

Does the pupil have an:

Allergy Action Plan? ☐ Yes ☐ No

Asthma Action Plan? ☐ Yes ☐ No

Other specialist medical plan? ☐ Yes ☐ No

Where an Action Plan has been provided by a healthcare professional, it should be **attached to and read alongside this Individual Healthcare Plan.**

Date of current Action Plan: _____

Copy attached: ☐ Yes ☐ No ☐ N/A

9. Educational Visits and Off-Site Activities

Are additional arrangements required for educational visits?

☐ Yes ☐ No

If yes, specify:

Medication to accompany pupil: _____

Who is responsible for ensuring medication is taken on the visit?

A specific risk assessment should be completed where necessary, particularly for pupils at risk of anaphylaxis.



10. Staff Information and Training

Staff who need to be aware of this plan:

- ☐ Class Teacher
- ☐ Teaching Assistants/HLTAs
- ☐ Senior Leadership Team
- ☐ First Aiders
- ☐ Office Staff
- ☐ Lunchtime Staff
- ☐ Catering Team
- ☐ Breakfast/After-School Club Staff
- ☐ PE/Sports Staff
- ☐ Supply/Cover Staff
- ☐ Educational Visit Leaders
- ☐ Other: _____

Specific staff training required:

Date training completed: _____

Training provided by: _____

11. Information Sharing

Information contained within this plan will only be shared with staff and other relevant individuals who need the information to support the pupil safely.

Are there any specific arrangements regarding how information should be shared?

12. Pupil Voice

Where appropriate, the pupil should be involved in developing their healthcare arrangements.

What does the pupil understand about their condition/allergy?

What does the pupil say helps them to feel safe and supported at school?



What can the pupil manage independently?

13. Parent/Carer Responsibilities

Parents/carers agree to:

- provide the school with accurate and up-to-date medical information;
- notify the school promptly of any changes to the pupil's condition;
- provide prescribed medication as agreed;
- ensure medication provided to school is correctly labelled and in date;
- provide updated Allergy/Asthma Action Plans where applicable; and
- work in partnership with the school to review this plan.

Any additional agreed responsibilities:

14. School Responsibilities

The school will:

- implement the arrangements agreed within this plan;
- ensure relevant staff have appropriate information;
- provide appropriate training where required;
- ensure prescribed emergency medication is rapidly accessible;
- make reasonable adjustments where necessary;
- consider the pupil's medical needs when planning activities and visits;
- respond appropriately to medical emergencies; and
- review this plan when relevant information changes.

15. Individual Risk Assessment

Is a separate individual risk assessment required?

☐ Yes ☐ No If

yes:

Date completed: _____

Completed by: _____

Review date: _____



16. Plan Agreement

This Individual Healthcare Plan has been developed in consultation with the pupil, where appropriate, their parent/carer, relevant school staff and healthcare professionals where required.

Parent/Carer

Name: _____

Signature: _____ Date: _____

School Representative

Name: _____

Role: _____

Signature: _____ Date: _____

Healthcare Professional (where involved)

Name: _____

Role: _____

Signature: _____ Date: _____

Pupil (where appropriate)

Name: _____

Signature: _____ Date: _____

17. Review

Plan created: _____

Review date: _____

Next planned review: _____

This plan should also be reviewed whenever:

- the pupil's medical needs change;
- medication changes;
- an updated Allergy or Asthma Action Plan is received;
- an incident or near miss identifies a need for change; or
- parents/carers, healthcare professionals or the school identify that existing arrangements require amendment.

Review Record

Date	Reason for Review	Changes Made	Reviewed By
------	-------------------	--------------	-------------

IMPORTANT – QUICK REFERENCE

Pupil: _____

Condition/Allergy: _____

Known trigger(s): _____

Emergency medication: _____

Medication location: _____

Key symptoms: _____

Immediate action: _____

Emergency contact: _____

Allergy/Asthma Action Plan attached: ☐ Yes ☐ No ☐ N/A

**IN AN EMERGENCY: FOLLOW THE ACTION PLAN, ADMINISTER EMERGENCY
MEDICATION WHERE INDICATED AND CALL 999.**

