

Mereworth Community Primary School

“Lasting learning experiences for life”

Mereworth Community Primary School



Allergy Safety Policy

Policy title	Allergy Safety Policy
School	Mereworth Community Primary School
Status	Statutory (required under Section 34, Children's Wellbeing and Schools Act 2026)
Named lead for allergy safety	Miss Lavelle, Head Teacher
Day-to-day administration	School Business Manager, supporting the Head Teacher with the allergy register, spare adrenaline device checks and training logistics
Approved by	Full Governing Body
Date approved	
Review cycle	At least every Term or sooner following any incident, near miss, or change in statutory guidance
Next review due	Autumn Term 2027
Version	v1.0 – August 2026

1. Statutory context and purpose

Section 34 of the Children’s Wellbeing and Schools Act 2026 requires all local authority-maintained schools, academies and pupil referral units to have an allergy safety policy. This policy sets out how Mereworth Community Primary School meets that duty and reflects the statutory guidance on allergy safety published by the Department for Education.

This policy applies to all children, staff, volunteers and visitors on the school site, and to school-organised activities off-site, including educational visits and trips.

Named Senior Leader: Miss Lavelle, Head Teacher, has overall responsibility for allergy safety at Mereworth Community Primary School, including driving the implementation of this policy and leading its termly review. The School Business Manager supports the Head Teacher with the day-to-day administration of the policy, including maintaining the allergy register, checking spare adrenaline devices and coordinating staff training.

The Full Governing Body will review this policy at least annually, and sooner following any incident, near miss, or update to statutory guidance/best practice that suggests areas for improvement.

Publication: This policy is published on the school website (www.mereworth.kent.sch.uk), and a hard copy is available from the school office on request, in line with the governing body’s duty to ensure the policy is readily accessible to parents and staff.

2. Culture

2.1 Awareness training

All staff present during times when pupils are on site receive allergy awareness and emergency response training at least annually. This includes permanent staff, temporary and supply staff, agency workers, Caterlink catering staff, and regular volunteers who oversee children, including at breakfast and after-school clubs. It does not extend to contractors with no pupil-facing role, such as builders or maintenance engineers.

Training is delivered in-house, via online modules or led by a member of SLT or a First Aid Professional, and takes place during an INSET day at the start of the autumn term each year. New staff receive allergy awareness training as part of their induction, before working unsupervised with pupils. Supply and cover staff booked at short notice receive a summary briefing from the school office on arrival, covering how to check the allergy register and locate spare adrenaline devices, with full training arranged as soon as practicable.

Training ensures all staff:

- Have an awareness of allergy, the risks it poses, and how allergic reactions can occur;
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever and others), which can co-exist;
- Understand the difference between food allergy, coeliac disease and food intolerance;
- Know where to find information on allergy triggers for individual children (the school’s allergy register, held on Bromcom and in the medical folder in the school office);
- Can identify the range of symptoms of an allergic reaction, and understand and can recognise anaphylaxis;

- Know how to respond in an emergency, including calling 999 and informing parents, how to locate and administer emergency medication (adrenaline auto-injectors and asthma reliever inhalers), and how to use both a child's own prescribed device and a "spare" school device;
- Understand the impact an allergy can have on a child's wellbeing;
- Understand this allergy safety policy;
- Know how to check whether a child is on the allergy register and how to use an Allergy or Asthma Action Plan;
- Understand their responsibilities in reducing the risk of children with known allergies coming into contact with their allergens;
- Understand how to report an allergic reaction or case of anaphylaxis, whether an incident or a "near miss", using the form at Appendix C.

This training covers allergy awareness and emergency response only. It does not replace any separate clinical governance, competency sign-off or delegation arrangements needed where a child requires individual healthcare support beyond school-level allergy safety arrangements – these are set out in the child's Individual Healthcare Plan.

2.2 Wellbeing

We recognise that living with an allergy, and the possibility of anaphylaxis, can be a significant source of anxiety for children and their families. Class teachers and the SENCO work with parents to understand how a child's allergy affects them day to day, and agree and record reasonable adjustments (for example, seating at lunch, involvement in cooking or science activities, or discreet carrying of medication) in the child's Individual Healthcare Plan.

Bullying or teasing relating to a child's allergy, dietary needs or medical equipment is treated as seriously as any other form of bullying and will be addressed in line with the school's Anti-Bullying Policy. Staff are alert to signs that a child feels excluded or anxious because of their allergy (for example around food-based celebrations or trips) and will work with the child and their parents to address this sensitively.

3. Minimising risk

We take reasonable steps to minimise the risk of children, staff, volunteers and visitors coming into contact with their known allergens:

- Food provided by the school's catering contractor, Caterlink, is prepared with allergen information available for every dish (see section 4);
- Food brought onto the site by parents, children, or staff - such as birthday treats, cake sales, or class celebrations - must include a list of ingredients for homemade items when used for events like bake sales. Store-bought items should remain in their packaging until the event ends, so staff/parents can verify allergen information if needed and refer to the allergy register. Class teachers remind parents of relevant allergens before food-related events and provide "allergen-aware" alternatives at whole-school events whenever possible. An ingredients list must be clearly visible next to any 'home made food items' and shop brought products packaging must be made available for the duration of the event so that parents can check the ingredients list.
- Where children have a known allergy to airborne or contact allergens (for example nuts, latex, or animal dander), reasonable measures are put in place, which may include restricting specific allergens from a classroom, using non-latex gloves, or adjusting seating and resources for that child;

- Staff planning any activity – including cooking, science, art, craft, musical activities (for example instruments with reed or animal-product components) or activities involving animals – must check the allergy register and consider the risk of allergen exposure before the activity takes place;
- A specific risk assessment is completed for any child with an allergy before an educational visit or trip, in line with section 6 of this policy.

4. Food allergy

Our contracted caterer, Caterlink, provides school meals. Caterlink provides allergen information for every item on the menu, in line with Natasha's Law and food information regulations, and makes it available to parents via the school office and displays it in the dining hall.

Before a child with a known food allergy starts at Mereworth, or when an allergy is newly identified, the school office directs the parent to complete Caterlink's online allergy intolerance form so the child's allergens are flagged in the kitchen's system and appropriate meal alternatives can be prepared. Midday supervisors are given a summary of children with food allergies in their lunch sitting and are trained to recognise the visual identifier used on site, which is a pink-coloured tray and cutlery, to help kitchen and supervisory staff identify a child's meal safely. Parents will be made aware of the visual identifier used in school.

Parents of children with food allergies are encouraged to discuss menu choices directly with the kitchen manager and may request ingredient information.

5. Individual children and young people

5.1 Identification

The school maintains a central allergy register (held on the Bromcom medical module, with a paper back-up folder in the school office) recording all children, staff and regular visitors with a known allergy, their specific allergen(s), and whether they carry or have access to adrenaline auto-injector (AAI) devices. Appendix A provides a template.

Information about known allergies is gathered at admission (via the new starter/medical information form), on transition from a child's previous setting, and at any point during the year when a parent notifies the school of a new or changed allergy.

5.2 Individual Healthcare Plans

A child will have an Individual Healthcare Plan (IHP) where:

- They have an allergy which has a functional impact on them at school;
- They are at risk of harm as a result of their allergy; and
- They require arrangements which are additional to or different from those made generally for all pupils.

The IHP sets out the additional or different arrangements in place to support the child, including in an emergency, and the SENCO develops it with the child's parents and, where relevant, healthcare professionals. Where a child has an Allergy Action Plan and/or Asthma Action Plan issued by a healthcare professional, this is attached to their IHP, and the IHP is reviewed whenever an updated Action Plan is received, and at least annually.

5.3 Prescribed adrenaline

Where a child is prescribed their own adrenaline auto-injector device, the school ensures the child has rapid access to it at all times in class, the lunch hall, the playground, on the sports field, and on trips – recognising that in a case of anaphylaxis, adrenaline should be administered within five minutes.

Prescribed AAI devices are kept in a named, clearly labelled pouch in the child's classroom (as agreed in their IHP) and will be taken on school trips. Parents are asked provide an in-date replacement promptly if the device is used or due to expire. The school office keeps a record of which children have been provided with a prescribed AAI device and Allergy Action Plan, cross-referenced on the allergy register at Appendix A.

6. School-wide policies

6.1 "Spare" adrenaline devices

In addition to any individually prescribed devices, the school holds 2 150mg and 2 300mg "spare" (unassigned) adrenaline auto-injector devices for emergency use, in line with best-practice guidance and the Human Medicines (Amendment) Regulations 2017.

- Spare devices are stored on the wall in the main entrance hall, next to the visitor toilets and the doors to Year R and Year 1, in a clearly labelled **"emergency anaphylaxis kit"** alongside a spare asthma reliever inhaler, spacer and instructions for use;
- Spare devices are stored in pairs, so a second device is immediately on hand if the first dose does not provide relief; and a second dose is required before emergency services arrive;
- Devices are readily accessible at all times and are not locked away;
- Devices are clearly labelled as "spare/school stock" to avoid confusion with any device prescribed to a named child;
- The School Business Manager checks the spare devices at the start of each half term to confirm they remain in date, logging each check at Appendix B;
- Any device that is used, damaged, or approaching its expiry date is replaced promptly; used or expired adrenaline auto-injectors are disposed of safely as sharps waste (they contain a needle) via the school's clinical waste collection, never in general waste.

6.2 Visits and trips

Children with allergies are supported to take part fully and safely in educational visits and trips. Before any trip, the trip leader checks the allergy register and for any child with an allergy, a specific risk assessment considering catering arrangements and potential allergens at the destination, travel time back to site or to emergency care, and access to medication throughout the visit.

A child at risk of anaphylaxis takes their own prescribed adrenaline device with them on any trip, and at least one member of staff trained to administer adrenaline in an emergency accompanies the group at all times.

6.3 Serious incidents and “near misses”

Any allergic reaction, case of anaphylaxis, or “near miss” (where a child came close to contact with their allergen but harm was avoided) is recorded using the incident report form at Appendix C, reported to the Head Teacher, and shared with the child’s parents on the same day.

We recognise that the impact of an allergen exposure at school is not always immediately obvious, and symptoms can develop after a child has gone home. Parents, children and healthcare professionals are asked to let the school know if a reaction becomes apparent after the school day, so it can still be recorded and learned from.

Following any incident or near miss, the Head Teacher and SENCO review the circumstances, the child’s IHP, and this policy, to identify and act on any lessons learned. Serious incidents are also reported to the governing board and, where required, to the Health and Safety Executive under RIDDOR.

6.4 Information sharing

Information about a child’s allergy is shared with staff who need to know it to keep the child safe, including the class teacher, teaching assistants, midday supervisors, catering staff and, for trips, accompanying adults, on a need-to-know basis.

A child’s health information, including allergy details, is special category data under UK GDPR and is handled in line with the school’s Data Protection Policy and Privacy Notices. It is stored securely on Bromcom and in the school office, shared only where necessary, and handled sensitively so children do not feel singled out or embarrassed in front of their peers.

6.5 Awareness of the allergy safety policy

This policy is published on the school website and is available in hard copy from the school office on request. All staff are made aware of the policy and expected to understand it as part of their annual allergy awareness training.

Where a child is prescribed an AAI device, the school will discuss with the child and their parents whether it is appropriate for close friends to have some age-appropriate awareness of how to seek adult help in an emergency. Any such wider awareness-raising is agreed with the family on an individual basis and never replaces the staff emergency response arrangements set out in this policy.

Appendix A: Allergy register (template)

To be maintained by the School Business Manager and cross-checked against Bromcom each term.

Child's name	Class	Known allergen(s)	IHP in place?	AAI on site?	Action Plan review date

Appendix B: Spare AAI device check log

To be completed at the start of each half term and immediately after any device is used.

Date checked	Location	Device(s) & batch no.	Expiry date	In date? (Y/N)	Checked by

Appendix C: Allergic reaction / near miss incident report form

Child/adult's name	
Class / role	
Date and time of incident	
Location on site	
Known allergen(s) involved	
Symptoms observed	
Was treatment administered? E.g. Piriton/similar what and by whom?	
Was adrenaline administered? By whom? Which device (named or spare)?	
Were emergency services called?	
Were parents/carers informed? When?	
Staff present / first responder	
Was this an incident or a near miss?	
Lessons learned / actions arising	
Report completed by / date	
Reviewed by Head Teacher / date	