The Park Federation
ACADEMY TRUST

Allergy and Anaphylaxis Policy

Approved by	Luke Richmond, Principal		
Date	September 2026	**Next review due**	September 2027

Summary of Changes

Version	Date	Summary of Changes	Approved By
1.0	July 2026	Introduction of allergy guidance and Benedict's Law	Helen Abell, CEO
1.1	September 2026	Adaptations specific to Wood End Park Academy	Luke Richmond, Principal

Contents

Heading	Page
Aims and Objectives	3
What is an Allergy?	3
Definitions	4
Roles and Responsibilities	5
Information and Documentation	7
Assessing Risk	8
Food Including Meal Times and Snacks	8
Educational Visits	10
Insect stings	10
Animals	10
Allergic Rhinitis/Hayfever	10
Inclusion and Mental Health	11
Adrenaline Pens	11
Responding to an Allergic Reaction/Anaphylaxis	12
Training	13
Asthma	13
Reporting Allergic Reactions	13

1. AIMS AND OBJECTIVES

This policy outlines Wood End Park Academy's approach to allergy management, including how the whole-school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our pupils with allergies with their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school. This policy should be published on the academy's website so it is accessible to all parents.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies:

- Supporting children and young people with medical conditions (2026)
- Safeguarding Policy (updated annually)

This policy has been developed in line with:

- Department for Education *Supporting pupils with medical conditions at school*

https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

- Department of Health *Guidance on the use of emergency adrenaline auto-injectors in schools*
  https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf

- Department for Education *Allergy Safety in Schools*

https://assets.publishing.service.gov.uk/media/6a4b8f49045e1108aaa5ebbc/allergy_safety_in_schools_statutory_guidance_June_2026.pdf

- The Food Information Regulations 2014 and PPDS labelling requirements (Natasha's Law)

- Equality Act 2010

2. WHAT IS AN ALLERGY?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

3. DEFINITIONS

ANAPHYLAXIS: Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

ALLERGEN: A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods.

Eggs	Peanuts	Tree Nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc)
Sesame	Fish	Shellfish
Soya	Wheat	Milk

There are 14 allergens required by UK law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

ADRENALINE AUTO-INJECTOR: Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAIs, adrenaline pens or by brand names such as EpiPen or Jext. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy we will refer to them as Adrenaline Pens.

ALLERGY ACTION PLAN: This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.

DESIGNATED ALLERGY LEAD: The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff.

Neffy (marketed in the UK as EURneffy) is a needle-free nasal spray that delivers adrenaline. It is an alternative to adrenaline auto-injectors and was approved for use in the UK in 2025.

INDIVIDUAL HEALTHCARE PLAN: A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document should be created by

schools in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

RISK ASSESSMENT: A detailed document outlining an activity, the risks it poses and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.

SPARE ADRENALINE PENS: Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

4. ROLES AND RESPONSIBILITIES

Wood End Park Academy takes a whole-school approach to allergy management. The academy's Academy Council should ensure that the school complies with its statutory duties in relation to allergy safety and supporting pupils with medical conditions.

a. Designated Allergy Lead

The senior leader responsible for allergy safety and the implementation of the policy is Luke Richmond (Principal). The Designated Allergy Leads are Hayley Carter and Jodie Coker. They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy.
- Taking decisions on allergy management across the school.
- Championing and practising allergy awareness across the school.
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management.
- Ensuring allergy information is recorded, up-to-date and communicated to all staff.
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment).
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures. Written confirmation that staff have read and understood the policy will be obtained at the start of each academic year.
- Reviewing the school's stock of spare adrenaline pens (check the school has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline pens are stored appropriately) and ensuring staff know where they are.
- Keeping a record of any allergic reactions or near-misses, reporting these on IAmCompliant and to appropriate authority (e.g. RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared.
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy.
- Ensuring there is an anaphylaxis refresher once a year.

At regular intervals the Designated Allergy Lead will check procedures and report to the Senior Leadership Team.

b. The Admin Team

Zanib Syed (Admissions officer) is likely to be the first to learn of a pupil or visitor's allergy.

They should work with the Designated Allergy Leads to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity before a child starts school.
- There is a clear structure in place to communicate this information to the relevant parties. i.e. Allergy Lead, Principal, Class Teacher.
- Parents and pupils are informed of catering arrangements during admission events.
- Plans are made for emergency medication if the child is to be left without parental supervision.

c. All staff

All school staff, including teaching staff, support staff, lunchtime supervisors, occasional staff e.g. sports coaches, music teachers and breakfast and afterschool club staff are responsible for:

- Championing and practising allergy awareness across the school.
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed.
- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to.
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate.
- Ensuring pupils always have access to their medication or carrying it on their behalf.
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training.
- Taking part in training as required (at least once a year). Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager.
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy.
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the Designated Allergy Leads and Principal.
- Ensuring that pupils have their medication and their Individual Health Care Plan with them when leaving school site, for a trip or residential event.

d. All parents

All parents and carers (whether their child has an allergy or not) are responsible for:

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies.
- Providing the school's designated Allergy Lead with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema.
- Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising

events.
- Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice.
- Encouraging their child to be allergy aware.

e. Parents of children with allergies

In addition to point 4.5, the parents and carers of children with allergies should:

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan.
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams.
- Ensure medication is in-date and replaced at the appropriate time.
- Update school with any changes to their child's condition, reactions that happen outside of school and ensure the relevant paperwork is updated too.
- Sign the associated permission for a photo to be shared appropriately as part of their allergy management.
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.

f. All pupils

All pupils at the school should:

- Be allergy aware.
- Understand the risks allergens might pose to their peers and respect measures to support them.
- Learn how they can support their peers and be alert to allergy-related bullying.
- Older pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency.

g. Pupils with allergies

In addition to point 4.7, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk depending on their age.
- Avoiding their allergen as best as they can.
- Understanding the importance of following the school-specific processes of lunch and snack services and how that mitigates risk.
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction.
- Understanding how and when to use their adrenaline auto-injector.
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy.
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies.

5. INFORMATION AND DOCUMENTATION

a. Register of pupils with an allergy

The school has a register of pupils who have a diagnosed allergy. This includes children who

have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.

b. Individual Healthcare Plans

Each pupil with an allergy has an Individual Healthcare Plan. The information on this plan includes:

- Known allergens and risk factors for allergic reactions.
- A history of their allergic reactions.
- Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc.
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis.
- A photograph of each pupil.
- A copy of their Allergy Action Plan.

6. ASSESSING RISK

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking.
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk.
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. The school will ensure compliance with the Equality Act 2010.

7. FOOD, INCLUDING MEALTIMES & SNACKS

a. Catering in school or coming into school from the academy catering department

The school is committed to providing a safe meal for all pupils, staff and visitors, including those with food allergies.

- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training.
- The Early Years Foundation Stage Guidance ‘safer eating’ section must be followed regarding allergies and the required supervision of children in the early years. At each

mealtime and snack time providers must be clear about who is responsible for checking that the food being provided meets all the requirements for each child.

- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures.
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff.
- The catering team will endeavour to provide varied meal options to pupils and staff with allergies.
- The school has robust procedures in place to identify pupils with food allergies: staff introduce colleagues to the child, follow the allergy list with key details and a photo of the child that is kept in all staff areas and which is regularly updated. These steps help prevent accidental exposure.
- Food containing the main 14 allergens (see Allergens definition) will be clearly labelled. Other ingredient information will be available on request if a child/adult with a different allergy joins our school.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging.
- Where changes are made to the ingredients this will be communicated to the lead lunchtime supervisor who will cascade to other lunch staff and to the pupils with dietary needs.
- Any products that say "may contain" will not be given to a child with a known allergy unless parents have been asked prior and permission gained.
- Food provided at breakfast club and after school club will follow these procedures.
- Outline any other catering procedures for example avoiding food with nuts as an ingredient.

b. Food brought into school

All food brought into school, including on trips and events, must be shop-bought with clear ingredient labels or accompanied by an ingredient list. Sharing food is discouraged to avoid allergy risks. Birthday cakes and treats require teacher approval and must be shop-bought. Parents must notify the school of any allergies or dietary needs, and staff are trained to manage these safely.

c. Food bans or restrictions

Everyone needs to be allergy aware and to remain vigilant.

- This school is an Allergen Aware school. We have pupils with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food.
- Parents/carers should not send in any foods containing peanuts and tree nuts.
- All food coming onto school premises or taken on a school trip should be checked to ensure peanuts and tree nuts are not an ingredient in another product. Please check the label on all foods brought in. Common foods that contain these ingredients include packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, sauces.

d. Food hygiene for pupils

- Pupils will wash their hands before and after eating.
- Sharing, swapping or throwing food is not allowed.

- Water bottles and packed lunches should be clearly labelled.

8. EDUCATIONAL VISITS

- Staff leading the trip will have a register of pupils with allergies and details of their medication.
- Allergies will be considered on the risk assessment and catering provision put in place.
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay.
- Staff accompanying the trip will be trained to recognise and respond to an allergic reaction.
- Allergens will be clearly labelled on catered packed lunches. The Visit Lead will liaise with Pabulum to ensure any allergies are catered for.
- Adrenaline Pens and medication will be with a responsible adult who is with the child at all times during the trip.

9. INSECT STINGS

Those with a known insect venom allergy should:

- Where possible keep arms and legs covered.
- Avoid wearing strong perfumes or cosmetics.
- Keep food and drink covered.

The school staff will monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them.

10. ANIMALS

It's normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic.
- If an animal comes on site a risk assessment will be done prior to the visit.
- Areas visited by animals will be cleaned thoroughly.
- Anyone in contact with an animal will wash their hands after contact.
- If an animal lives on site, pupils, parents and staff will be made aware and consideration and adaptations will be made
- School trips that include visits to animals will be carefully risk assessed.

11. ALLERGIC RHINITIS/ HAY FEVER

Any children who suffer with seasonal pollen allergy will bring in the required medication needed to alleviate the symptoms and follow our school's administering medications procedures outlined in our *Supporting Children And Young Children With Medical Conditions*

and allergy policy.

12. INCLUSION AND MENTAL HEALTH

Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip.
- Pupils with allergies may require additional pastoral support including regular check-ins from a trusted adult.
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives.
- Bullying related to allergy will be treated in line with the school's anti-bullying policy.
- The school recognises that severe allergies may constitute a disability under the Equality Act 2010 and will make reasonable adjustments where required.

13. ADRENALINE PENS

See the government guidance on Adrenaline Pens in Schools.

a. Storage of adrenaline pens

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times.
- Adrenaline pens and antihistamine medication will be stored with the child's medication in the class first aid bag. In the box will be a copy of the child's health care plan & allergy action plan. This will be stored in the child's classroom in a clearly marked cupboard. All staff will make themselves aware of where this is in each classroom. They will never be locked in a cupboard or stored away from the child.
- Spot checks will be made to ensure adrenaline pens are where they should be and on date.
- Adrenaline pens must not be kept locked away.
- Adrenaline pens should be stored at moderate temperatures, not in direct sunlight or above a heat source e.g. a radiator.
- Used pens will be disposed of as sharps or given to the medical team that come to help. Adrenaline pens will be changed before they go out of date and old pens given back to parents/carers to dispose of. Alerts of when they expire will be on the school's central calendar.

b. Spare adrenaline pens

This school has two spare adrenaline pens to be used in accordance with government guidance. Epipen for ages 0-6 (0.15mg) and two spare Epipen 6-12/adults (0.3mg)

The location of the spare adrenaline pen is clearly signposted. Epipen for ages 0-6 will be kept in welfare with the defibrillator. Epipens for 6-12/adults will be kept in the front office with the defibrillator.

The Allergy Lead and Principal are responsible for:

- Deciding how many spare pens are required.
- What dosage is required, based on the Resuscitation Council UK's age-based guidance
- Which brand to buy. Schools are recommended to buy a single brand, if possible, to

avoid confusion.

- The purchasing of spare adrenaline pens, which can be obtained from medical suppliers.
- Distribution around the site and clear signage.

c. Adrenaline pens on off-site activities

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them.
- Adrenaline pens will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms.
- Adrenaline pens will be protected from extreme temperatures.
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction.
- Consider whether to take spare adrenaline pens to off-site activities. This should be recorded as part of the risk assessment process.

14. RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS

See appendix on recognising and responding to an allergic reaction

If a pupil has an allergic reaction:

- Treat the pupil in accordance with their Allergy Action Plan.
- Instigate the school's Emergency Response Plan.
- If anaphylaxis is suspected, administer adrenaline without delay.
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them.
- Use the pupil's own prescribed medication if immediately available.
- Pupils can administer the adrenaline pen themselves if able to or a member of staff can administer the adrenaline pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline if necessary.
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen.
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life.
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given.
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better.
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.

15. TRAINING

The school is committed to training all staff annually to give them a good understanding of allergies.

This includes:

- Understanding what an allergy is.
- How to reduce the risk of an allergic reaction occurring.
- How to recognise and treat an allergic reaction, including anaphylaxis
- A training adrenaline pen will be onsite for use after training to build confidence.
- How the school manages allergies, for example Emergency Response Plan, documentation, communication etc.
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them.
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying.
- Understanding food labelling.
- Taking part in an anaphylaxis refresher.

16. ASTHMA

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions. Inhalers will be kept with the child's allergy medication and we will follow our school's administering medications procedures outlined in our Supporting children and young people with medical conditions and allergy policy.

17. REPORTING ALLERGIC REACTIONS

The school will log allergic reaction incidents and near misses. Incidents will be reviewed to identify any improvements to procedures.The Designated Allergy Lead will review incidents to identify patterns or risks and update risk assessments where required.