Brampton Village Primary School

and

Brambles Pre-School

Allergy Safety Policy

Date Agreed	September 2026
Date of Review	September 2027

Outline

This policy has been written in line with current UK legislation and statutory guidance, including: Keeping Children Safe in Education; Working Together to Safeguard Children; and the Department for Education's statutory guidance "Allergy Safety in Schools" (July 2026). It is also written to support the school in meeting expectations in the OFSTED (2025) framework around Safeguarding, Inclusion, Curriculum and Teaching, Achievement, Attendance and Behaviour, Personal Development and Well-being, Early Years, Post-16 Provision (where relevant), and Leadership and Governance.

Purpose

- To ensure children and young people with allergies at Brampton Village Primary School are enabled and supported to attend as fully as possible and to participate in all aspects of school life safely.
- To set out roles, responsibilities and practical arrangements for allergy prevention, preparedness and response including anaphylaxis and acute asthma.
- To ensure compliance with the statutory guidance "Allergy Safety in Schools" (July 2026) and relevant legislation.

Policy scope

- Applies to all pupils (including pre-school class), staff (teaching and non-teaching), governors, volunteers, contractors and visitors to Brampton Village Primary School.
- Covers identification, risk reduction, emergency response, training, Individual Healthcare Plans (IHPs), use and storage of prescribed and spare adrenaline devices and asthma inhalers, visits and trips, recording and reporting incidents, information sharing and staff awareness.

Key principles

- Inclusion and wellbeing: Pupils with allergies must be included in school life, with reasonable adjustments made to enable participation and reduce barriers to learning and social inclusion.
- Prevention: Minimise risk of exposure to known allergens through whole-school prevention measures.
- Preparedness: Staff trained in recognition and emergency response for anaphylaxis and acute asthma; Individual Healthcare Plans where required.
- Proportionality and dignity: Share necessary information only with those who need it to keep the pupil safe; respect privacy and dignity.
- Continuous improvement: Record incidents and near misses, review policy at least annually and after incidents, and use learning to refine practice.

Roles and responsibilities

Governing Body

- Ensure the school has a comprehensive allergy safety policy and that it is published on the school website and available in hard copy on request.
- Ensure resources are allocated for training, stock of spare adrenaline devices and inhalers, and policy implementation.
- Ensure a named governor has oversight of medical conditions and allergy safety.

Headteacher / Senior Leadership Team (SLT)

- Overall responsibility for implementing and monitoring this policy and for ensuring statutory compliance.
- Appoint a named senior leader responsible for the allergy safety policy (Allergy Lead). Record their name and contact details here: Molly Edwards, SENDCo and Sheryl Dachs, SBM.
- Ensure the policy is reviewed annually and after any serious incident or near miss.
- Ensure systems exist for risk assessment, Individual Healthcare Plans (IHPs) and safe storage of emergency medication.
- Ensure staff access required training and that training records are kept.
- Ensure information is shared appropriately and that pupils' wellbeing is promoted.

Allergy Lead (Molly Edwards/Sheryl Dachs)

- Maintain the central register of pupils and staff with allergy and/or asthma.
- Ensure Individual Healthcare Plans are in place and up to date.
- Coordinate training, drills, stock management of spare adrenaline devices and inhalers.
- Lead reviews after incidents and update policy/practice accordingly.

SENCo / Inclusion Lead

- Support development and implementation of IHPs, liaise with external specialists and families, and ensure reasonable adjustments for pupils with SEND and allergy-related needs.

Designated Safeguarding Leads (DSLs)

- Ensure allergy incidents with safeguarding implications are managed and referred appropriately and that multi-agency safeguarding processes are followed where necessary.

Class teachers and support staff

- Be aware of pupils in their care with allergies/asthma and follow IHPs and classroom management measures.

- Ensure quick access to prescribed and spare emergency medication during the school day, trips and extracurricular activities.
- Take part in annual allergy awareness training and any refresher training required.

First aid trained staff

- Provide emergency response for allergic reactions and asthma attacks; receive additional training beyond basic first aid as required (see Training section).

Catering staff and mid-day supervisors

- Follow food allergy management arrangements including handling of ingredient/label information, segregation of food where needed and safe service at meal times.
- Be trained in recognising allergic reactions and emergency procedures.

Parents and carers

- Provide accurate, up-to-date medical information about their child including diagnosis, triggers, medications and emergency contact details.
- Work with school to develop, review and sign Individual Healthcare Plans and Allergy Action Plans.
- Ensure prescribed adrenaline devices and inhalers are in date and replaced promptly.
- Provide consent for emergency use of spare adrenaline devices and any required photo/medical information to be shared with staff.

Pupils

- Where age-appropriate, take responsibility for managing their allergy (with support) and learn to recognise symptoms and how to seek help.
- Pupils' friends may be taught, with parental consent and pupil assent, how to seek help in an emergency (this will not replace staff emergency response).

Visitors, contractors and volunteers

- Are expected to follow school rules around allergens and food; be informed where necessary about pupils with life-threatening allergies in their area of work.

Identification and recording

- The Allergy Lead will maintain a central, secure register of pupils (and staff where relevant) with allergies and asthma. This register will include:
    - Diagnosis and known allergens/triggers.
    - Severity (history of anaphylaxis or not).

    - Prescribed medication details (brand, dose), location and expiry dates.
    - Emergency contact details and GP/consultant details.
    - Individual Healthcare Plan link and last review date.
- Display or access: Staff will have timely access to essential information (class lists with key medical alerts) while ensuring privacy and data protection. This information will also be kept within a medical folder in the dining hall, the first aid room and online in Medical Tracker and Bromcom.
- Medical one page profiles will be displayed in the staffroom so staff can be aware of the most at risk children medically.

Individual Healthcare Plans (IHPs) and Allergy Action Plans

- Any pupil whose allergy requires supportive arrangements should have an Individual Healthcare Plan. The IHP should:

    - Include the child's details, diagnosis, triggers, usual symptoms and severity.
    - Set out preventative measures in school and any reasonable adjustments.
    - Specify location, storage and administration protocol for prescribed medication.
    - Include an Allergy Action Plan and/or Asthma Plan where relevant with clear step-by-step actions for mild, moderate and severe reactions (anaphylaxis).
    - Detail roles and responsibilities in an emergency and communication arrangements with parents/carers.
    - Be signed by parent/carer and reviewed at least annually or whenever circumstances change.
- We will use existing templates such as the DfE or local authority IHP template, and adapt for school context.
- IHPs will be kept in class folders, in medical folders as well as on Bromcom and Medical Tracker.

Preventative measures and whole-school risk reduction

- General measures:

    - Promote a culture of awareness and inclusion while avoiding unnecessary restriction of pupils' experiences.
    - Communicate allergy safety expectations to pupils, parents and staff and publish the allergy safety policy on the school website.
    - Ensure catering and lunch-time staff have access to up-to-date allergen information and ingredient lists for all meals provided.
    - Encourage good handwashing and cleaning practises at meal times and after outdoor activities.
- Classrooms and activities:

    - Establish clear rules about food in classrooms (e.g., no birthday food unless pre-agreed and pre-packaged with ingredient labelling).
    - Food-based activities, cooking and DT: risk assess and obtain parental consent, ensure alternatives and safe workstations are available.
- Environment:
    - Manage storage and labelling of snacks, ingredients, and communal food areas.
    - Ensure clear signage where necessary (e.g., in kitchens), whilst respecting confidentiality.
- Catering:
    - School kitchen to use standardised allergen tracking for all dishes (14 major allergens plus any local concerns) and communicate menu allergen information to staff and parents.
    - Procedures for packed lunches: Provide guidance to parents of all pupils about not including foods known to cause life-threatening reactions for any pupil in the immediate class where necessary, but avoid whole-school bans unless justified by specific local risk assessment.

- The school will communicate to parents the 'nut-free' school approach and this will also apply to curriculum food. Birthday treats are also not allowed within school and will be communicated to parents.

Prescribed adrenaline devices, asthma inhalers and spare emergency medication

- Prescribed medication:
    - Pupils at risk of anaphylaxis must have immediate access to their prescribed adrenaline device (e.g., EpiPen) and/or asthma inhaler, as stated in their IHP.
    - The location(s) of prescribed medication must be recorded and be accessible during lessons, breaks, sport, trips, and after-school activities.

- Spare adrenaline devices and inhalers:
    - The school will maintain spare adrenaline devices (one or more depending on risk assessment) for emergency use for pupils who are at risk of anaphylaxis and may not have immediate access to their prescribed device.
    - Spare devices will be stored securely in the main school office but accessibly, with clear labelling and logging of use.
    - Spare asthma inhalers: where lawful and appropriate, the school may keep emergency inhalers for pupils with asthma who cannot use their own inhaler in an emergency (in line with Department for Education guidance).

    - All spare devices will have a named responsible person for stock checks, storage, and replacement before expiry.
- Administration and consent:
    - Ensure parental consent for use of spare devices is obtained where required; if immediate life-saving treatment is needed and consent is not available, staff should act in the pupil's best interests (in line with guidance).
    - Document any administration of emergency medication, inform parents and record on the incident log.
- Disposal and record keeping:
    - Expired devices to be removed from stock and replaced promptly.
    - Keep records of all medication administration, training on device use and any use of spare devices.
    - Sheryl Dachs will oversee the checking and removal of our of date devices.

Training and drills

- All staff:
    - Receive annual allergy awareness training as part of induction and refreshed at least annually. Training must cover recognition of allergic reactions, anaphylaxis, emergency response and location of adrenaline devices and inhalers.
    - Training should go beyond basic first aid (first aid alone is not sufficient).
- Designated responders / first aiders:
    - Receive training in recognising and treating anaphylaxis and in the use of adrenaline auto-injectors (practical, hands-on training) and in managing acute asthma.
    - Training to be updated at recommended intervals (e.g., every 3 years for practical adrenaline device training and as local guidance dictates).
- Staff involved in trips, clubs and extra-curricular activities:
    - Receive briefing and access to relevant IHPs and medication information prior to activity.
- Drills:
    - Conduct allergy safety drills (simulated anaphylaxis) periodically to test preparedness, record outcomes and use findings to improve practice. Involve pupils where appropriate and with consent to avoid negative impacts.
- Training records:

    - Keep central record of staff training, dates, providers and content.

Visits, trips and extracurricular activities

- Pre-visit planning:
    - Risk assess for each pupil with allergies and update IHPs to reflect any additional measures required.
    - Ensure medication and spare devices are taken on trips and accessible during transport.
    - Ensure staff on trips have access to IHPs, emergency contacts and training (at least briefing) before departure.
- Food and accommodation:
    - Ascertain catering arrangements and allergen information for off-site venues and ensure reasonable adjustments are in place.
- Transport:
    - Ensure medication accompanies the pupil and is accessible to staff/carers during journeys.

Communication and information sharing

- Communicate the allergy safety policy and expectations to staff, parents, pupils and governors; publish on the school website and make a hard copy available on request.
- Ensure consent forms are up to date and include permission for emergency use of spare devices and for sharing relevant information in an emergency.
- Information sharing must be proportionate and compliant with data protection law: only share medical details with staff who need to know to keep the pupil safe.
- Raise awareness among pupils to prevent bullying and stigma related to allergies; integrate age-appropriate teaching into the curriculum (Personal Development and Well-being).
- The school will publicise the allergy safety policy to new and existing parents, pupils and staff.
  Molly Edwards and Sheryl Dachs will ensure that timely updates to IHPs are communicated to relevant staff?

Incident reporting, recording and review

- Record all allergy-related incidents and near misses centrally (date, time, pupils involved, description, action taken, medication administered, outcome, witness statements).
- Immediately inform parents/carers after any significant incident and complete any required safeguarding reporting.

- Review incidents to identify learning and make necessary changes to procedures, training or the policy.
- The SLT and governing body should be informed of serious incidents and subsequent actions taken to reduce risk.
- All incidents will be recorded and stored on Medical Tracker.
- The Headteacher/Governor will review the records of incidents on a termly basis/or after a significant incident or near miss updating the policy as required.

Safeguarding and multi-agency working

- Where an allergy or related incident gives rise to safeguarding concerns, the DSL will follow statutory safeguarding procedures and work with multi-agency partners as required.
- Pupils who are absent for prolonged periods or not receiving adequate support must be identified, and appropriate safeguarding action taken.

Equality, inclusion and anti-bullying

- Ensure the needs of pupils with allergies are considered as part of equality and inclusion duties, reasonable adjustments and the Pupil Premium strategy where relevant.
- Tackle bullying linked to allergy status promptly—ensure anti-bullying policy references allergic bullying.
- Promote peer understanding and support in ways agreed with the pupil and parents.

Premises, catering contracts and third parties

- Ensure contracts with caterers or external providers include clear requirements for allergen management and staff training.
- Where the school hires premises or uses third-party providers, ensure they meet the school's allergy safety standards during provision.

Record keeping and data protection

- Maintain secure records of IHPs, medication logs, training, incidents and consent forms.
- Share information on a need-to-know basis; ensure compliance with GDPR and local data protection policies.
- The Headteacher is the GDPR lead for the school.

Policy review

- This policy will be reviewed at least annually and after any serious incident or near miss.
- Reviews should involve pupils with allergies, parents, staff (including catering and lunchtime staff), governors and where appropriate, health professionals.

- The governing body will approve policy changes.
- The Headteacher/names governor and Allergy Leads will be involved in the annual review.

Appendices and supporting documents

Appendix A: Template Individual Healthcare Plan / Allergy Action Plan (insert local template or link)

- Appendix B: Guidance on safe storage and use of adrenaline auto-injectors (EpiPen etc.) and emergency asthma inhalers
- Appendix C: Staff training log template
- Appendix D: Incident and near-miss reporting template
- Appendix E: List of local NHS/ambulance and emergency contacts and procedures for contacting emergency services
- Appendix F: Catering allergen checklist and supplier declarations
- Appendix G: School-specific quick reference: pupils with allergies (class lists) — kept securely and updated termly

Related policies

- Safeguarding and Child Protection Policy
- First Aid Policy
- Administration of Medicines Policy
- Health and Safety Policy
- Data Protection Policy
- Behaviour and Anti-bullying Policy
- SEND Policy
- Educational Visits Policy

Final notes

- Brampton Village Primary School is committed to ensuring pupils with allergies are safe, included and supported. This policy will be implemented in a way that aligns with our school vision and 6R values.
- Recording, regular review and stakeholder involvement are central to continuous improvement and compliance with statutory guidance.

Useful resources

- Department for Education: Allergy Safety in Schools (July 2026)
- NHS and local health services for clinical support and training providers
- Training providers for anaphylaxis and inhaler administration