Collège Français Bilingue de Londres

("CFBL" or the "School")

Allergy and Anaphylaxis Policy

Authorised by:	The Board of Governors of CFBL
On:	WR 09 September 2026
Frequency of review:	Annually or following any updates to national and local guidance and procedures if sooner
Next scheduled review:	06/2027
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CONTENTS

1. POLICY STATEMENT, PURPOSE AND SCOPE

This policy outlines CFBL's whole school 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 the School supports pupils with allergies to ensure their safety, wellbeing and full inclusion, and demonstrates the School's commitment to being an Allergy Aware School.

This policy applies to all members of the School community, including staff, pupils, parents, visitors, contractors, agency staff, volunteers, and any external companies or third-party service providers engaged by the School, such as catering, cleaning.

It should be read alongside the following policies:

- Administration of Medication Policy
- Supporting Pupils with Medical Needs Policy
- First Aid Policy
- Health and Safety Policy

This policy should also be read with regard to:

- *Early Years Foundation Stage Statutory Framework for group and school-based providers*, effective 1 September 2026;
- Department for Education, *Allergy Safety in Schools – Statutory Guidance*, July 2026;
- Department for Education, *Supporting Pupils at School with Medical Conditions*;
- Department of Health and Social Care guidance on emergency adrenaline auto-injectors in schools;
- relevant Food Standards Agency allergen guidance;
- Equality Act 2010;
- Children and Families Act 2014, as amended by the Children's Wellbeing and Schools Act 2026, including the allergy safety provisions commonly referred to as **Benedict's Law**.

CFBL is committed to reflecting the principles of Benedict's Law and current national allergy safety guidance in its arrangements for staff training, emergency response, access to adrenaline auto-injectors, allergen communication and food provision.

2. UNDERSTANDING ALLERGIES AND ANAPHYLAXIS

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. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. See Appendix 1 for detailed information on anaphylaxis.

People can be allergic to anything, but serious allergic reactions are most commonly caused by:

- food
- insect venom (such as wasp or bee stings)
- latex
- medication

People who have never had an allergic reaction before, or who have only had mild to moderate reactions previously, can experience anaphylaxis.

3. DEFINITIONS

ANAPHYLAXIS
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 individuals, triggers an allergic reaction. Common allergens include food, medication, animal dander and pollen.

COMMON FOOD ALLERGENS
Most severe allergic reactions to food are caused by nine foods: eggs, milk, peanuts, tree nuts (including hazelnut, cashew, pistachio, almond, walnut, pecan, Brazil nut, macadamia), sesame, fish, shellfish, soya and wheat.

14 ALLERGENS REQUIRED BY LAW
Under the Food Information Regulations 2014, the following must be declared: celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites and sesame.

ADRENALINE AUTO-INJECTOR (AAI)
A single-use device containing a pre-measured dose of adrenaline, used to treat anaphylaxis by injection into the upper outer thigh. Common brands include EpiPen and Jext.

ALLERGY ACTION PLAN
A document completed by a healthcare professional outlining an individual's allergy and treatment plan.

INDIVIDUAL HEALTHCARE PLAN (PAI)
A detailed document outlining a pupil's condition, medical history, risks, treatment and emergency procedures. It is developed with parents/carers and the School.

RISK ASSESSMENT
A document identifying potential risks and control measures for an activity.

SPARE PENS
Adrenaline auto-injectors held by the School for emergency use when a pupil's own device is unavailable or in exceptional circumstances.

SERIOUS ALLERGY INCIDENT
An event in which a person with an allergy is harmed or placed at immediate and significant risk of harm, including an event requiring emergency medication, urgent clinical intervention or attendance by emergency services.

NEAR MISS
An allergy-related event which does not result in harm but had the clear potential to do so, for example where an error, omission or system failure could reasonably have resulted in a serious incident had circumstances been slightly different.

4. GOVERNANCE, ROLES AND RESPONSIBILITIES

CFBL takes a whole-school approach to allergy management. The School is committed to providing a safe, inclusive and well-managed environment for pupils with allergies. Effective allergy management depends on:

- clear leadership
- accurate information sharing
- staff training
- robust procedures

- consistent daily practice

The Designated Allergy Lead will routinely review procedures and report any issues or required improvements to the Health and Safety Officer.

4.1 Designated Allergy Lead

The Designated Allergy Lead is Elodie Malard, CFBL School Nurse. She reports to the Headteacher and the Health and Safety Officer.

Responsibilities include:

- Ensuring the safety, inclusion and wellbeing of pupils with allergies
- Leading allergy management across the School
- Acting as the main point of contact for staff, parents and pupils
- Ensuring allergy information is accurate, up-to date and communicated appropriately to all the 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)
- Reviewing the stock of the School's spare adrenaline pens (check the School has enough and the locations are correct) and ensuring staff know where they are
- Maintaining records of incidents and ensuring an investigation being held as to the cause and putting in place any learnings. Any issue should be reported to the Health and Safety officer.
- Reviewing and updating the policy annually
- Organising annual anaphylaxis emergency drills, at least once a year

4.2 School Nurse

The School Nurse is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans (PAI) and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the Admissions Team for new joiners)
- Ensuring the information from families is up-to-date on the School's records (i.e: Eduka / PAI / health forms). This information will be reviewed annually or following a change in a child's health profile.
- Coordinating medication with families. Whilst it's the parents and carers responsibility to ensure medication is up to date, the Nurse should also have systems in place to check this and notify the parents when they see the expiry date is approaching
- Keeping an adrenaline pen register to include Adrenaline Pens prescribed to pupils and Spare Pens, their dose and expiry date. The location of Spare Pens should also be documented.
- Regularly checking spare pens are where they should be, and that they are in date and replacing them when necessary
- Providing on-site adrenaline pen training for other members of staff and pupils and refresher training as required eg. before school trips

4.3 Admissions Team

The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead to be responsible for:

- Collecting allergy and medical information at enrolment: Parents/guardians are required to fill out the Health information section on Eduka platform when enrolling their children at CFBL. If Eduka health forms are not completed with the relevant information before school entry, children won't be allowed to start school.
- Requesting annual updates of medical information, before every new academic school year. It is the parents/guardians responsibility to update it before the start of the school year subject to delaying their children's first day at school.
- Ensuring visitors (for example at open days and events) are informed of allergen arrangements when food is provided. In the event of food being offered on these events, a sign with allergens information will be displayed.

4.4 All Staff

All School staff, to include teaching staff, support staff, catering staff, occasional staff (for example sports coaches, music teachers and those running breakfast and afterschool clubs) must:

- Practise allergy awareness
- Follow this policy and related procedures, and ask for support if needed
- Recognise and respond to allergic reactions, including anaphylaxis
- Participate in training and emergency drills as required (at least one a year).

Additionally, teachers and staff members supervising pupils including the occasional staff must also:

- Be aware of pupils with allergies
- Assess risks in all activities
- Ensure access to medication : pupils always have access to their medication or carrying it on their behalf
- Support inclusion and wellbeing of pupils with allergies at all times
- Prevent and respond to allergy-related bullying, in line with the School's anti-bullying policy

4.5 All Parents and Carers

All parents and carers are responsible for:

- Being aware of and supporting the School's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies
- Providing the School with accurate and up-to-date information about their child's medical needs, including dietary requirements and allergies on their child's profile on Eduka. The School Nurse must also be informed.
- Informing the School Nurse of any changes to their child's condition
- Refraining from telling the School their child has an allergy or intolerance if this is a preference or dietary choice
- Adhering to School food policies, including the nut-free requirement (banning peanuts and all tree nuts from the School grounds). Common foods that contain these goods as an ingredient include: packaged nuts, cereals bars, chocolate bars, nut butters, chocolate spread, sauces.
- Ensuring that any food provided for school activities is safe and appropriately labelled
- Supporting their child in developing awareness of allergies and safe behaviours : Pupils are not allowed to share their snacks with their peers unless/when bringing food to be shared on social or fundraising events. Packaged food showing a full list of ingredients will be necessary in these instances and must be checked by a member of staff together with the spreadsheet listing the dietary

requirements of the pupils present. The School reserves the right to refuse any homemade food brought into School as it may pose a risk of cross-contamination. (refer to section 10 Food brought to School)

4.6 Parents and Carers of Pupils with Allergies

In addition to the above (5.5), parents of pupils with allergies must:

- Work with the School to complete and maintain a PAI (PAI- Projet d'Accueil Individualisé, in French) and provide an accompanying Allergy Action Plan filled in by a Healthcare professional - see template Paediatric Allergy Action Plans - BSACI]. The School nurse will require details of their allergy, including allergens involved, history of any previous allergic reactions or anaphylaxis. They should also inform the School of any related conditions, for example asthma, hayfever, rhinitis or eczema.
- Return a signed copy of the PAI to the School nurse (when possible it would be digital)
- Provide all required medication, including at least two in-date labelled adrenaline auto-injectors and any other related medication where prescribed. Medicines are kept together with the PAI in the infirmary.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Inform the School of any changes in diagnosis or treatment
- Where appropriate, essential allergy information and emergency arrangements are made readily accessible to relevant staff in classrooms and other areas in which the pupil is supervised, with appropriate regard to confidentiality and UK data protection requirements - for example, agree for the PAI to be displayed in the classroom (early years and primary section only).
- Support their child in understanding 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 they are allergic to.

4.7 All Pupils

All pupils are expected to:

- Be aware of the risks that allergens may pose to others.
- Support a safe and inclusive school environment and learn how they can support their peers and be alert to allergy-related bullying.
- Not bring into School snacks or food items containing nuts in order to adhere to the School nut-free policy. Pupils found with food items containing nuts will be asked to hand over their snack to a member of staff. The food will be given back at the end of the school day.
- Report any concerns or incidents to a member of staff

4.8 Pupils with Allergies

Pupils with allergies are supported to take increasing responsibility for managing their condition, and are expected (where age appropriate) to:

- Know what their allergies are and how to mitigate personal risk. This is particularly important from Year 3 onwards when children are helping themselves from the buffet instead of being served a pre-plated meal
- Understand their allergies and how to avoid triggers
- Carry or know the location of their medication
- Inform a member of staff immediately if they feel unwell or suspect a reaction

- Understand how and when to use their adrenaline auto-injector if age appropriate and trained to do so.

5. IDENTIFICATION, INFORMATION AND RECORD-KEEPING

5.1 Register of Pupils with an Allergy

The School maintains a register of pupils who have a diagnosed allergy. Allergy information is provided by parents / guardians via the Eduka platform.

The School Nurse creates and maintains internal tracking documents, including:

- a spreadsheet of food allergies and intolerances for catering staff and lunch supervisors
- a spreadsheet of medical information (Fiche santé) for teachers and assistants

These documents are shared with relevant staff to ensure appropriate awareness and response.

5.2 Information Management and Updates

- Allergy information must be accurate and up to date at all times
- Information is reviewed:
    - annually
    - following any change in a pupil's health condition

Parents / guardians are responsible for:

- updating Eduka
- informing the School Nurse directly of any changes

The School ensures that relevant staff are informed promptly of any updates.

5.3 Data protection

The School processes personal and medical information relating to pupils with allergies in accordance with UK data protection legislation, including the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

All allergy and medical information is:

- Collected for the purpose of safeguarding pupil health and safety
- Stored securely
- Shared only with staff who need the information to fulfil their role

Further details on how personal data is handled are set out in the School's Data Protection Policy.

6. INDIVIDUAL HEALTHCARE PLANS AND ALLERGY ACTION PLANS

6.1 Individual Healthcare Plans (PAI)

All pupils with allergies must have an Individual Healthcare Plan.

Each PAI includes:

- Known allergens and risk factors for allergic reactions
- Medical history and previous reactions
- Detail of the medication the pupil has been prescribed including dose; this should include adrenaline pens, antihistamine etc.
- A photograph of each pupil
- Emergency procedures
- Parent / guardian contact details
- A copy of their Allergy Action Plan if provided by the parents. See Allergy action plan template

PAIs are developed collaboratively between:

- The School
- Parents / carers
- Healthcare professionals (where appropriate)

PAIs/IHPs and Allergy Action Plans are living documents. The School will maintain ongoing dialogue with parents/carers and, where appropriate, relevant healthcare professionals to ensure that allergy and intolerance information, treatment arrangements and emergency procedures remain current. Relevant updates will be communicated promptly to staff who care for or supervise the pupil.

6.2 Storage and Accessibility

- Medication and PAI documents are stored together in the infirmary
- They are kept in clearly labelled, easily accessible PAI bags
- Early years and primary classrooms display PAIs for safety purposes (as required by Ofsted)

7. RISK ASSESSMENT AND ACTIVITY PLANNING

Allergens can appear in unexpected situations. Allergy risks must be considered in all school activities.

Staff must include allergy considerations in all risk assessments, including mainly (list not exhaustive):

Classroom activities

- Use of food in lessons
- Science experiments
- Craft activities

Events and celebrations

- Cultural days
- Fundraising events

- Shared food activities

Clubs and extracurricular activities

- Provision of snacks or treats
- Food-based activities

School trips and off-site activities

- Staff must carry allergy registers and medication details
- Pupils must have access to medication at all times meaning adrenaline pens must not be stored in luggage or in accessible areas
- Packed lunches must be clearly labelled and adapted for pupils with allergies
- Alternative meal arrangements where needed during school trips

Pupils with allergies must **not be excluded**. Activities should be adapted where necessary.

8. FOOD MANAGEMENT AND CATERING CONTROLS

The School is committed to providing a safe food environment for all pupils.

CFBL operates an allergy-aware environment and applies a **strict nut-free policy**, meaning:

- No peanuts or tree nuts are permitted on site (brought onto or provided on the school site)
- This applies to:
    - Canteen food
    - Packed lunches
    - Snacks
    - Events
    - Trip or Outing

Under the Food Information Regulations 2014, the 14 following allergens must be declared : celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites and sesame.

8.1 Communication with the Catering Team

Effective communication between the Designated Allergy Lead, the catering team and supervising staff is essential to ensure the safety of pupils with food allergies and intolerances.

The Designated Allergy Lead (School Nurse) will provide the Catering Manager with a comprehensive and up-to-date list of all pupils with:

- food allergies
- food intolerances
- specific dietary requirements (including vegetarian diets)

This information will:

- be provided **prior to the start of each academic year and whenever changes occur**

- be based on medical and dietary information submitted by parents via the Eduka platform

All information is collected and maintained in accordance with the procedures set out in sections 5 and 6 of this policy.:

The catering provider will use this information to ensure safe menu planning, food preparation and service, in line with the School's allergen management procedures.

8.2 Canteen Safety System

In order to ensure a high degree of control and safety for children with food allergy, the School put in place a 3 steps process and operates a multi-layered control system:

1. Personalised badges

- each pupil with dietary needs (food allergy, intolerance or vegetarian) has a personalised badge with:
    - Name
    - photo
    - allergy / restriction
- Badges are placed in boxes sorted by class for early years and primary pupils. For secondary students with food allergy, the information will be displayed on their canteen badge (implementation of canteen badges for every secondary students in 2026-2027)

2. Coloured tray system

- **Red** → food allergy
- **Orange** → food intolerance
- **Green** → vegetarian

3. Controlled serving

- Badge checked only by the allergy champions from the catering staff when serving food to the children. The allergy champions from the catering staff are the only ones authorised to serve the pupils with allergy or dietary requirement.

8.2.1 Early Years to Year 2

- teachers place badges on pupils before entering canteen
- pupils are guided to designated seating
- meals are:
    - pre-checked
    - pre-plated
- supervisors double-check:
    - badge vs meal
- badges are collected after lunch

Afterschool snacks are provided by the School to reduce risk.

Additional EYFS requirements

For children within the EYFS:

- at all meal and snack times, there will be a member of staff in the room who holds a valid full paediatric first aid qualification;
- children will remain within sight and hearing of a member of staff whilst eating;
- responsibility for checking that food and drink meet each child's individual dietary and allergy requirements will be clearly allocated at every meal and snack time;
- relevant allergy, intolerance and dietary information will be shared with all staff involved in preparing, handling or serving food;
- staff will actively supervise eating to prevent food sharing and to identify promptly any unexpected allergic reaction.

8.2.2 Year 3 to Year 10

- pupils collect their own badge and tray
- badge is given to catering staff
- allergy champions:
    - guide food choices
    - ensure safety
- badges are returned after service

8.3 Catering Standards and Compliance

The School ensures:

- allergen awareness training for all catering staff during the monthly review with the manager of the canteen
- compliance with **Food Information Regulations 2014 :** The School ensures compliance with the Food Information Regulations 2014 by clearly identifying and communicating the presence of allergens in all food provided. Allergen information is made available to pupils, staff and visitors through appropriate labelling, menus and staff knowledge.
- compliance with **Natasha's Law (PPDS)** for pre-packed foods : All food prepared and packaged on site for direct sale (PPDS) must comply with Natasha's Law (2021), meaning that full ingredient lists and allergen information must be clearly labelled on the packaging. This does not apply to the School, as there are no direct sale.
- **Packed meals for trips** are clearly labelled with pupil name and allergens information
- Compliance with **Benedict's Law (2026)** : The School will monitor and prepare for the implementation of emerging allergen legislation, which is expected to include:
    - enhanced staff training in recognising and responding to allergic reactions and anaphylaxis
    - clear and accessible emergency procedures, including the use of adrenaline auto-injectors
    - appropriate availability and accessibility of adrenaline auto-injectors on site and during school activities
    - strengthened communication of allergen information to pupils, staff and parents
    - reinforced responsibilities for food providers in preventing allergen exposure

    The School will review and update its procedures as required to ensure full compliance once formal guidance is published.

9. FOOD BROUGHT INTO SCHOOL

Pupils are not allowed to share their snacks or any food brought into School with their peers, except in controlled situations such as social or fundraising events.

In these cases:

- only packaged food with a full list of ingredients is permitted
- food must be checked by a member of staff
- staff must cross-check against the allergy register

The School reserves the right to refuse any homemade food, as it may pose a risk of cross-contamination.

All children enrolled at CFBL take their lunch at School. Holroyd Howe provides all meals on site and works closely with the School Nurse to accommodate dietary requirements.

Pupils are not allowed to bring packed lunches unless:

- the catering team cannot safely provide for a specific medical need
- prior approval is obtained from:
    - School Nurse
    - Deputy Headteacher or Health and Safety Officer

In such cases, reimbursement of lunch fees is at the discretion of the School.

Staff bringing food into School must:

- ensure it does not contain nuts or peanuts
- verify it is safe for all pupils present, if they intend to share
- consult allergy records or the School Nurse where necessary

10. ENVIRONMENTAL AND NON-FOOD ALLERGENS

10.1 Insect Stings

Pupils with a known insect venom allergy must have a PAI detailing:

- the specific allergy
- expected reaction
- required emergency treatment

Medication must be available at School.

Precautions include:

- avoiding bare feet outdoors
- wearing appropriate clothing
- avoiding strong perfumes
- keeping food covered outdoors

Any sting must be reported immediately to the School Nurse or a first aider.

The School monitors the grounds for insect nests, and pupils must report any findings to staff.

10.2 Animals

Animal allergies are typically caused by dander.

Control measures include:

- avoiding known allergens
- completing a risk assessment before animals are brought on site
- cleaning affected areas
- handwashing after contact

Parents are informed if animals are present on site for extended periods.

Trips involving animals are carefully risk assessed.

10.3 Allergic Rhinitis / Hayfever

Parents must:

- record hayfever on Eduka
- inform the School Nurse if symptoms develop or worsen

A PAI may be implemented if regular treatment is required.

Children should:

- minimise exposure during peak pollen times
- wear protective clothing outdoors
- wash hands and face regularly

Medication:

- taken at home where possible
- or administered by the School Nurse with parental consent

11. INCLUSION, WELLBEING AND ANTI-BULLYING

Allergies can significantly impact mental health and wellbeing.

The School ensures that:

- no pupil is excluded due to allergies
- activities are adapted where necessary
- pupils are supported emotionally and socially

Bullying related to allergies:

- is taken seriously
- is addressed under the Anti-Bullying Policy

The School promotes awareness through:

- education sessions
- staff guidance
- pupil engagement

12. MEDICATION MANAGEMENT – ADRENALINE AUTO-INJECTORS

12.1 Individual Adrenaline Pens

Adrenaline pens prescribed to pupils with allergy and kept within the School grounds must be available at all times.

Requirements:

- two in-date pens provided by families when possible
- stored with the PAI in clearly labelled bags
- kept in accessible locations (infirmary)

Storage conditions:

- moderate temperature
- away from direct sunlight or heat sources

Additional provisions:

- used pens given to ambulance crews
- expired pens returned to families
- spare expired pens disposed of safely

For pupils carrying their own pens:

- responsibility lies with families
- pens must be carried at all times at School and during trips or outings

12.2 Spare Adrenaline Pens

The School holds spare adrenaline pens in accordance with government guidance.

These are:

- clearly signposted
- distributed across key locations

Current provision includes:

- canteen emergency boxes (0.15 mg and 0.3 mg)
- PE staff emergency kits
- off-site activity emergency kits for CFBL afterschool club

PE staff and club supervisors must carry emergency kits during off-site activities and call emergency services immediately if used.

13. RESPONDING TO AN ALLERGIC REACTION / ANAPHYLAXIS

The most serious type of allergic reaction is anaphylaxis. It must always be treated as a medical emergency.

All staff must be familiar with the School's emergency procedures and the content of pupils' Allergy Action Plans.

13.1 General Principles

- A pupil having an allergic reaction will be treated in accordance with their Allergy Action Plan.
- If anaphylaxis is suspected, adrenaline must be administered immediately without delay.
- If anaphylaxis is suspected, administer adrenaline immediately and call 999 for an ambulance and guidance. If there is doubt as to whether symptoms amount to anaphylaxis, treat with adrenaline. Do not delay administration of adrenaline while waiting to contact emergency services.
- The pupil should be:
    - laid flat
    - with legs raised (unless breathing is difficult, in which case they may sit upright)
- The pupil must be treated where they are, and medication brought to them.

13.2 Use of Medication

- A pupil's own prescribed medication should be used first if available.
- If the pupil's own adrenaline pen is not available or misfires, a spare adrenaline pen must be used
- Adrenaline may be administered:
    - by the pupil themselves (if able)
    - or by a member of staff
- Ideally, staff administering medication will be trained. However, in an emergency, any member of staff may administer adrenaline (see instruction into Annexe 2).

13.3 When No Plan or Medication Is Available

If anaphylaxis is suspected and:

- no Allergy Action Plan is available
- or the pupil does not have a prescribed adrenaline pen

Staff must:

- lay the pupil flat with legs raised
- call 999 immediately
- clearly state that anaphylaxis is suspected

Staff must inform the emergency operator that:

- spare adrenaline pens are available on site

They must then follow instructions provided by emergency services.

Any staff member can legally administer adrenaline to an individual suffering a severe allergic reaction (anaphylaxis), even if the person has no known history of allergies or a prior diagnosis

Anaphylaxis may occur in a pupil, staff member or visitor with no previously diagnosed allergy. A lack of an Allergy Action Plan or previous diagnosis must never delay emergency treatment. Where anaphylaxis is suspected, adrenaline should be administered without delay and 999 called.

13.4 After Administration of Adrenaline

- The pupil must not be moved unnecessarily
- They must remain under supervision until emergency services arrive
- Even if symptoms improve, the pupil must go to hospital
- Used AAI must be replaced at the earliest convenience

If there is no improvement after five minutes, or symptoms worsen, administer a second dose of adrenaline using a second AAI and continue to follow the instructions of the 999 emergency operator.

13.5 Communication

- Parents / legal guardians must be contacted as soon as possible
- The incident must be:
    - recorded
    - reviewed
    - followed up with any necessary adjustments to procedures

14. TRAINING, MONITORING AND POLICY REVIEW

14.1 Training

All staff must receive appropriate allergy awareness training, including:

- recognising signs of allergic reactions
- recognising anaphylaxis
- using adrenaline auto-injectors
- understanding their role in prevention and response

Training must:

- take place at least annually
- be refreshed when needed (e.g. before trips or when new pupils join)

Training will include:

- understanding allergy and common allergic conditions;
- understanding the distinction between food allergy, food intolerance and coeliac disease;
- recognising mild/moderate allergic reactions, anaphylaxis and acute asthma;
- recognising that asthma and food allergy may co-exist and can increase the risk associated with anaphylaxis;
- recognising that a child may develop an allergy even where there is no previous diagnosis;
- locating and using Allergy Action Plans and Individual Healthcare Plans;

- Knowing how to respond in an emergency, including:
    - calling emergency services and informing parents;
    - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
    - training on how to use the medication/device in an emergency (whether prescribed to a given person or a School's "spare" adrenaline devices);
- reducing exposure to known allergens;
- supporting pupils' wellbeing and preventing allergy-related bullying;
- recording and reporting allergic reactions, serious incidents and near misses;
- understanding this Allergy and Anaphylaxis Policy.

14.2 Emergency Drills

- Medical emergency drills, including anaphylaxis scenarios, must be carried out at least once a year
- These drills help ensure staff confidence and effective response

14.3 Monitoring and Incident Review

All allergic reactions and near misses must be recorded. The record should identify:

- who was affected;
- what happened, when and where;
- the known or suspected cause;
- how staff and pupils responded;
- what treatment or support was provided;
- whether emergency services were called; and
- the outcome.

Parents/carers will be informed as soon as possible and given the opportunity to contribute relevant information to the review. Serious incidents and near misses will be reported to the Designated Senior Lead for Allergy Safety and, where appropriate, the governing body.

Where required, incidents will also be reported to external bodies, including the relevant local authority food safety team, Health and Safety Executive under RIDDOR, Ofsted or other agencies in accordance with applicable statutory reporting requirements.

For children within the EYFS, any allergic incident meeting the threshold of a serious accident, illness or injury will be notified to Ofsted and other relevant agencies in accordance with the statutory EYFS reporting requirements, including the applicable 14-day notification period.

Incidents must be reviewed to:

- identify causes
- identify patterns or risks
- implement improvements

The Designated Allergy Lead is responsible for ensuring that learning from incidents is acted upon.

14.4 Policy Review

This policy will be:

- reviewed annually
- updated earlier if required due to:
    - changes in legislation
    - changes in School procedures
    - significant incidents

The School will also monitor emerging legislation, including:

- Food Information Regulations 2014
- Natasha's Law (PPDS)
- Anticipated Benedict's Law (from September 2026)

Audit trail
V1 = current

Document Owner and Approval

The Head of Finance & Administration is the owner of this document and is responsible for ensuring that it is reviewed in line with the School's policy review schedule.

APPENDIX 1: RECOGNISING AND RESPONDING TO AN ALLERGIC REACTION

Signs of a mild to moderate allergic reaction

- itching or tingling in the mouth
- hives or rash
- swelling of lips, face or eyes
- stomach pain or vomiting

Signs of anaphylaxis

- difficulty breathing
- swelling of tongue or throat
- persistent cough
- wheezing
- dizziness or collapse

Emergency response summary

1. Administer adrenaline immediately
2. Call 999 and state “anaphylaxis”
3. Lay pupil flat (or seated if breathing difficulty)
4. Monitor continuously
5. Send to hospital

Additional guidance

- Use a second adrenaline pen if symptoms do not improve after 5 minutes
- Do not leave the pupil alone
- Ensure clear handover to emergency services

APPENDIX 2 : HOW TO USE AN ADRENALIN AUTO-INJECTOR

How to use
an adrenalin autoinjector
(Epipen, Jext or Emerade)

First Aid for Life
The First Aid Experts

1. Hold in your dominant hand

2. Remove the cap with your other hand

3. Swing and jab the tip of the autoinjector into your upper, outer thigh (**with or without clothes, but avoiding seams**)

4. Hold the injection in place **for 10 seconds**

5. Massage the injection site for 10 seconds

6. Phone for an ambulance