



Manby Lodge Infant School

Policy for Allergy Safety

Written: Autumn 26 (new policy)

Next review: Autumn 2027 (or earlier if Surrey Model Policy is updated)

Allergy Safety Policy

This policy has been written using the Allergy Safety Policy template from Surrey County Council, with reference to Benedict's Law and the Department for Education statutory guidance on allergy safety in schools.

School	Manby Lodge Infant School
Effective date	1 September 2026
Review frequency	At least annually, and sooner following an incident or near miss
Next review	August 2027

1. Purpose and legal framework

This policy sets out how Manby Lodge Infant School will prevent, identify and manage allergy risks and support children and young people with allergies safely and inclusively. It is a separate allergy safety policy and should be read alongside the school's policies for Supporting Children with Medical Conditions, First Aid, Child Protection and Safeguarding, Educational Visits, Equality and Data Protection arrangements.

The policy is made with regard to section 34 of the Children's Wellbeing and Schools Act 2026, which inserted statutory allergy safety duties into the Children and Families Act 2014. The Act requires the appropriate authority to have an allergy safety policy, review it at least annually, publicise it to the school community and parents, publish it on the school website, and have particular regard to relevant statutory guidance.

Benedict's Law is the commonly used name for these strengthened allergy safety requirements. Allergy UK states that the new statutory guidance applies from the 2026–2027 academic year and requires relevant schools in England to have a whole-school allergy policy, provide allergy awareness and emergency response training, stock spare adrenaline auto-injectors for emergency use, and put appropriate Individual Healthcare Plans in place.

2. Policy principles

- Allergy safety is a whole-school responsibility and applies to pupils, staff and visitors.
- Allergy management includes food allergy and other allergic conditions, including asthma, eczema, hay fever/allergic rhinitis, contact allergies, insect-sting allergy and medicine allergy where relevant.
- The school will take proactive, reasonable measures to minimise exposure to known allergens while avoiding unnecessary exclusion or isolation.
- Children and young people with allergies should be able to attend school normally, participate in learning, trips, clubs and social activities alongside their peers, with reasonable adjustments where required.
- The school will maintain an allergy-aware culture rather than relying on a claim that the school environment can be completely allergen-free.

3. Responsibilities

Karen Saffer (Deputy Headteacher and DSL) has overall responsibility for implementation, monitoring and annual review of this policy, working with the governing body, staff (particularly the Lead Midday Supervisor

Helen Smith and Business Manager Helen Plummer), pupils, parents/carers and relevant healthcare professionals.

The Governing body will ensure the policy is reviewed at least annually, made generally known within the school and to parents, brought to the attention of pupils and staff at least annually, and published on the school website, as required by section 100A of the Children and Families Act 2014 as amended by the 2026 Act.

All staff are responsible for following this policy, reducing avoidable allergen exposure, knowing how to access allergy information and responding promptly to an allergic reaction or anaphylaxis.

Catering staff and anyone supervising breakfast clubs, lunchtime, after-school clubs or food-related activities must follow the school's allergen controls and food information procedures. This includes Early Years staff who supervise snack time.

Parents/carers should provide accurate, current information about their child's allergy, prescribed medication and healthcare/action plans, and replace medication before it expires. Individual health care plans for anaphylaxis must be written by a medical professional.

4. Culture and allergy awareness

The school will promote an inclusive culture in which allergies are treated seriously without defining or stigmatising a child. Staff will avoid practices that unnecessarily single out pupils with allergies.

Bullying, teasing, threats or deliberate exposure to an allergen will be treated as serious behaviour because an allergic reaction can be life-threatening. Such incidents will be managed under the school's behaviour and safeguarding procedures as appropriate.

The school will promote age-appropriate understanding of allergy among pupils. Where appropriate, and with the pupil and parent/carer's agreement, classmates may be taught how to seek adult help in an emergency. Pupil awareness does not replace staff emergency response arrangements.

5. Staff awareness and emergency response training

All staff who are present when pupils are scheduled to be on site will receive allergy awareness and emergency response training at least annually. This includes permanent and temporary staff, regular volunteers and trainee teachers. Catering and staff supervising breakfast or after-school provision will also receive training.

New staff will receive allergy safety information and the relevant emergency procedures as part of induction. Cover and supply arrangements will ensure that staff supervising pupils have access to the information and emergency arrangements they need.

Training will cover, as appropriate:

- the risks posed by allergy and how allergic reactions can occur;
- the range of allergic conditions and the difference between food allergy, coeliac disease and food intolerance;
- known allergens and where to find current pupil allergy information;

- common symptoms of allergic reactions and recognition of anaphylaxis;
- emergency response, including calling emergency services, informing parents/carers and locating and administering emergency medication;
- safe and competent use of adrenaline devices, including prescribed and spare devices;
- the wellbeing impact of living with allergy and how to support inclusion;
- the school's allergy safety policy and individual Allergy Action Plans / Asthma Action Plans;
- staff responsibilities for reducing exposure to known allergens; and
- recording and reporting allergic reactions, anaphylaxis, incidents and near misses.

Training under this policy is allergy awareness and emergency response training. It does not replace any separate clinical governance, competency or delegation arrangements required where an individual child needs additional healthcare support.

6. Minimising allergen exposure

The school will use proportionate preventative measures to reduce the likelihood of exposure to known allergens. Risk controls will consider the individual allergen, route of exposure, activity and setting.

- Food provided by the school or caterer will be managed using reliable allergen information, appropriate controls and procedures for medical/special diets.
- Food brought from home or supplied for celebrations, rewards or activities will be managed to minimise avoidable exposure. Staff should avoid food treats where practicable; where food is used, suitable alternatives will be provided for pupils with known allergies.
- The school will not describe itself as completely 'nut-free' or 'allergen-free'. An allergy-aware approach will be used, recognising that any food can cause an allergic reaction and that no school can guarantee that an allergen will never be brought onto the premises.
- Reasonable measures will be considered for airborne or contact allergens.
- Staff planning practical activities will consider allergen exposure in cooking, science, craft, music, food handling, animal-related activities and other relevant lessons or clubs.
- Shared surfaces and equipment will be managed appropriately where cross-contact presents a known risk.
- Handwashing before and after eating will be encouraged and age-appropriate hygiene controls will be used.
- Risk assessments for trips, visits and off-site activities will identify allergen risks and the emergency arrangements required. Medication will be taken on trips as necessary along with individual care plans.
- School dinners and dietary requirements and allergies will be managed by both school staff and catering staff. There will be daily checks and visual reminders for staff.

7. Food allergy and catering

The school/caterer will provide clear allergen information for food supplied by the school. Staff responsible for food provision will know which pupils require specific arrangements and will follow the relevant medical, diet and allergen procedures.

Where a pupil requires a medically necessary diet, the school will assess whether safe provision is feasible and will work with parents/carers and the caterer to agree suitable arrangements. Allergen information will be checked against current product and recipe information rather than assumptions.

Our allergy and dietary procedures include:

- Gathering information from parents
- Checking the menu and ingredients each day (school staff and catering staff)
- Using visual placemats for children, that state the allergen so all staff in the dinner hall are aware
- Food preparation areas kept separate/cleaned to reduce cross contamination
- Children with allergies have their food prepared before the other children to avoid cross contamination
- Medical booklets with individual care plans are kept in all classrooms, offices and communal spaces around the school including in the playground first aid kit
- Children who bring packed lunch sit the opposite end of the table from children with allergies who have school dinners.

Parents/carers will be reminded to be allergy safe when providing a packed lunch, shared picnic/party, celebration or ingredients for Design and Technology lessons. Appropriate alternatives will be discussed with the parent/carer and provided for the child as necessary.

Individual allergy information and this policy will be shared with our Parent Teacher Association (the Friends of Manby Lodge). They will take account of this when organizing events involving food or other common allergens.

8. Identification and allergy records

The school will identify pupils with known allergies as early as possible through information from the pupil, parents/carers, previous setting and, where appropriate, healthcare professionals.

A secure allergy record will include, where relevant, the known allergen(s), symptoms/risk information, prescribed medication, whether the pupil carries an adrenaline auto-injector, whether an Individual Healthcare Plan (IHP) and/or Allergy Action Plan is in place, and any agreed reasonable adjustments.

Staff will be asked to share information about allergies, medication and risk of allergic reactions, as we have a duty of care to staff. If necessary, the spare antihistamine, AAI or inhaler can be used by staff.

The school will ask visitors to share information about allergies as is necessary for their safety while on site. A sign reminds visitors when signing into the school, to make the office staff aware.

9. Individual Healthcare Plans and action plans

An IHP will be put in place where a child or young person's allergy has a functional impact at school, presents a risk of harm and requires arrangements additional to or different from those made generally.

The IHP will record the individual support and emergency arrangements required, including medication, reasonable adjustments, access to activities and emergency response. A healthcare-professional Allergy Action Plan and/or Asthma Action Plan will be attached or referenced where available.

When an updated action plan is provided, the IHP and relevant staff information will be reviewed and updated promptly.

Parents/carers and pupils will be involved in developing and reviewing individual arrangements wherever appropriate.

10. Prescribed adrenaline auto-injectors

Pupils prescribed adrenaline auto-injectors (AAIs) must have rapid access to their own devices at all times. In line with the statutory guidance, adrenaline should be administered within five minutes in a case of anaphylaxis. Access arrangements must therefore work in classrooms, dining areas, playgrounds, sports areas, clubs and on trips.

- Prescribed AAIs will be stored/carried in a cupboard in the central corridor, near the hall as this is in the centre of the school. This allows immediate access and is consistent with the pupil's age, competence and healthcare plan.
- Staff supervising the pupil will know where the device is and how to access it.
- The school will keep a record of prescribed devices and relevant action plans.
- Parents/carers will be reminded to take prescribed medication home when appropriate and to replace devices before expiry.
- The pupil's own prescribed medication remains essential; spare school AAIs do not replace prescribed devices.

11. Spare antihistamine, adrenaline auto-injectors and inhalers

The school holds spare antihistamine that can be given to children when staff suspect they are having an allergic reaction (not anaphylaxis). Parents/Carers will always be contacted before antihistamine is given, to seek permission and clarify the reason for the child's symptoms and determine whether they have already been given antihistamine before school.

The school will maintain spare, in-date adrenaline auto-injectors for emergency use in accordance with the statutory guidance and its operational arrangements. Spare devices are not a second set of prescription devices for an individual pupil; they may be used for any child or adult experiencing anaphylaxis where the emergency criteria are met. If the person is experiencing anaphylaxis and their own prescribed device is missing, broken, expired, or misfired, or if a person has an unexpected first-time reaction the spares may be used. Consent will be sought from parents/carers of children who have AAIs prescribed. This consent list will be included in our medical record booklet. Written consent ensures that the use of the spare AAI is appropriate and legally compliant.

- Spare AAIs will be stored in clearly labelled emergency anaphylaxis kits in the cupboard in the main corridor.
- Spare devices will be readily accessible and not locked away.
- Devices will be stored in pairs of the same dosage e.g., 150mcg for under age 6; 300mcg for over age 6.
- The school will locate sufficient pairs so that no pupil is more than five minutes from access to an appropriate device; larger or multi-site settings will assess whether additional pairs are needed.
- Expiry dates and condition will be checked routinely and recorded.

- Used or expired devices will be replaced promptly and disposed of safely, recognising that AAI's contain needles.
- Staff will be trained to use the available AAI devices.

The school's emergency kit also contains an emergency asthma reliever inhaler, spacers and clear instructions on how to use these. The spare asthma kit will be kept in the school office, in the medication cupboard. Consent will be sought from parents/carers of children who have asthma prescribed. This consent list will be included in our medical record booklet. Written consent ensures that the use of the spare asthma medication is appropriate and legally compliant.

Purchasing Rules: Under the Human Medicines Regulations, schools can purchase spare AAI's and asthma inhalers directly from a pharmacy without a prescription using a signed order form from the headteacher.

12. Emergency response to an allergic reaction / anaphylaxis

If a pupil or other person shows signs of anaphylaxis, staff will follow the individual's action plan where available and the school emergency procedure. The priority is rapid administration of adrenaline and emergency medical assistance.

1. Recognise the signs of a serious allergic reaction/anaphylaxis and treat the situation as an emergency.
2. Administer the person's prescribed adrenaline immediately where indicated by their action plan/emergency guidance, or use an appropriate spare AAI where permitted by the school's arrangements.
3. Call 999 and state that anaphylaxis is suspected.
4. If symptoms persist or recur and a second adrenaline device is available, follow the emergency guidance and individual action plan while awaiting emergency services.
5. Inform the parent/carer and ensure the pupil is accompanied and monitored until emergency care is transferred.
6. Keep the person lying down with their legs raised, or sitting up if more comfortable. Do not ask them to stand up.
7. Record and report the incident and initiate the school's serious incident/near-miss review process.

13. Visits, trips and off-site activities

Pupils with allergies will not be excluded from trips or activities solely because they have an allergy. Appropriate risk assessment, reasonable adjustments and emergency arrangements will be put in place.

- The trip risk assessment will identify relevant allergen exposure risks and controls.
- A pupil at risk of anaphylaxis will have their own prescribed adrenaline device and/or other medication with them.
- Spare/emergency medication will be accessible where the school's arrangements require it.
- Staff trained to recognise anaphylaxis and administer adrenaline will accompany the pupil where required.
- Catering, accommodation, transport, activities and emergency medical access will be considered before the visit.
- The child's IHP/action plan and emergency contacts will be accessible to the responsible staff.

14. Incidents and near misses

All allergic reactions, cases of anaphylaxis, significant allergen exposures and near misses will be recorded and reviewed. A near miss includes an event where exposure could have occurred or where a safety control failed but an allergic reaction did not result.

- Staff will report incidents promptly through the school's agreed reporting system.
- Parents/carers will be informed of incidents involving their child.
- The school will investigate what happened, including contributing factors and any failure or weakness in existing controls.
- Lessons learned will be shared with relevant staff and used to improve risk assessments, training and this policy.
- Governors/proprietors will be informed as appropriate.
- Incidents reported after the child has returned home will still be considered and investigated where relevant.

The statutory guidance emphasises learning from serious incidents and near misses and reviewing allergy safety arrangements where an incident indicates that an individual may have been placed at risk.

15. Allergy safety reminders

Staff will be reminded where the medication is kept in school, and how to respond to a child who may be having an allergic reaction. Staff reminders are shared during Friday morning meetings, staff CPD and quizzes throughout the year.

16. Information sharing and confidentiality

Allergy information is sensitive health information. The school will share information on a need-to-know basis so that staff responsible for a pupil's safety can take appropriate preventative and emergency action.

Information will be stored securely and handled in accordance with UK GDPR, the Data Protection Act 2018 and the school's data protection policy. Unnecessary disclosure or public identification of a child's allergy will be avoided.

The school will ensure that relevant staff can access current allergy information and action plans when they need them, including during trips, clubs and other activities.

17. Communication and publication

This policy will be published on the school website and made available in hard copy on request. It will be communicated to staff, and parents/carers at least annually and whenever significant changes are made.

Parents/carers will be reminded to notify the school promptly of new diagnoses, changes in allergens, updated action plans or medication changes.

If parents/carers need to raise concerns or report an allergy incident or near miss they can do so through the school office for the attention of Karen Saffer (Deputy Headteacher) or Miriam Morris (Headteacher).

18. Monitoring and review

The Deputy Headteacher will monitor implementation through training records, medication checks, allergy records, incident and near-miss reports, trip risk assessments, staff feedback and relevant audit activity.

The school Administration Assistants will gather information from parents, add it to the school MIS system, and prepare key information on allergies and medical needs for staff. They will also remind parents when medication is due to expire.

Our Lead Midday Supervisor will communicate with the catering team daily about the menu and ingredients, will maintain systems in place for allergy identification and dietary requirements. She will communicate key information to the rest of the midday staff team.

Our school Business Manager will have oversight of the menu and ingredients where children have additional needs eg diabetes. She will liaise with parents and the catering company where there are additional needs related to the menu or diet.

The Headteacher has overall responsibility for the allergy safety and awareness in school.

This policy will be reviewed at least annually and sooner where an incident, near miss, change in legislation/guidance, significant change in school operations or new clinical advice indicates that changes are needed.

The annual review will consider whether the policy remains effective in preventing exposure, enabling rapid emergency response, supporting inclusion and meeting the school's statutory duties.

19. Related policies and documents

- Supporting Pupils with Medical Conditions / Individual Healthcare Plan procedures
- Medicines and Administration of Medication Policy
- First Aid Policy
- Educational Visits Policy
- Health Safety and Welfare Policy
- Relationships and Behaviour Policy
- Anti-Bullying Policy
- Safeguarding and Child Protection Policy
- Equality Policy
- SEND Policy
- GDPR Data Protection Policy

20. Key references

Children's Wellbeing and Schools Act 2026, section 34 – allergy safety provisions in schools.

Department for Education, Allergy safety in schools – statutory guidance, published 6 July 2026.

Allergy UK, Benedict's Law – information for schools, accessed August 2026.

Allergy UK, For Schools and Childcare Settings – allergy management resources.