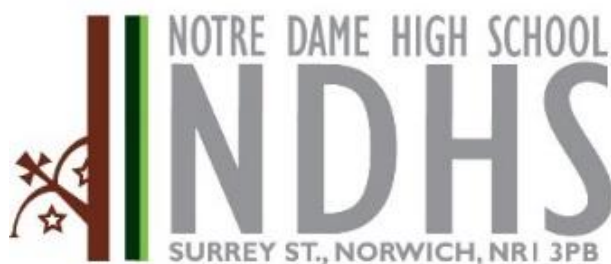


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24 Sept 2026
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1 Sept 2026



Review
Pastoral & Admissions
Committee

PUPIL ALLERGY POLICY

NOTRE DAME HIGH SCHOOL

Part of St John the Baptist Catholic Multi Academy Trust
Company No: 7913261
Registered Office: Surrey Street, Norwich NR1 3PB

THE SCHOOL MISSION STATEMENT

I have come so that they may have life and have it to the full
(John 10:10)

We are a joyous and inclusive Catholic school, inspired by the love of God and the teachings of Jesus,
specifically faith, hope, forgiveness and peace.

Our community is committed to a rounded education that develops knowledgeable, morally informed and
compassionate young leaders.



If you need this document in large print, audio, Braille, alternative format or in a different language please
contact the Company Secretary on 01603 611431 and we will do our best to help.

Pupil Allergy Policy

Contents

1. Aims	2
2. Legislation and guidance	2
3. Roles and responsibilities	2
4. Assessing risk.....	4
5. Managing risk	4
6. Procedures for handling an allergic reaction	5
7. Adrenaline auto-injectors (AAIs)	6
8. Training.....	7
9. Links to other policies.....	7

1. Aims

This policy aims to:

Set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction

To make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion

Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on [allergies in schools](#) and [supporting pupils with medical conditions at school](#), the Department of Health and Social Care's guidance on [using emergency adrenaline auto-injectors in schools](#), and the following legislation:

[The Food Information Regulations 2014](#)

[The Food Information \(Amendment\) \(England\) Regulations 2019](#)

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is Janice Murphy (DSL).

They're responsible for:

Promoting and maintaining allergy awareness across our school community

Recording and collating allergy and special dietary information for all relevant pupils although the allergy lead has ultimate responsibility, the information collection itself is supported by the student and pastoral support assistant.

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment

Keeping stock of the school's adrenaline auto-injectors (AAIs)

Regularly reviewing and updating the allergy policy

3.2 The school Designated Safeguarding Lead is responsible for ensuring:

Co-ordination of paperwork and information from families

Co-ordination of medication with families

Checking spare AAIs are in date

And delegation of appropriate tasks to Student Support Assistant in charge of the medical room

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of pupils with allergies by ensuring they have read any relevant IHCPs

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition
- Ensuring they have read their child's IHCP on their My child in school page and advised the school of any changes as and when these are required.

3.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Older pupils might also be expected to support their peers and staff in the case of an emergency.

4. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

5. Managing risk

5.1 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view with ingredients clearly labelled
- Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all [legal requirements](#) that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

5.2 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts

- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

5.3 Support for mental health

Pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy.

Pupils with allergies are offered additional support if needed.

5.4 Events and school trips

- For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAI

This links to our 'supporting pupils with medical conditions' policy.

- The school maintains a register of pupils who have been prescribed AAI or where a doctor has provided a written plan recommending AAI to be used in the event of anaphylaxis. The register includes:
 - Known allergens and risk factors for anaphylaxis
 - Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)
 - Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil
- The register is kept in the medical room and on the child's bromcom page. This and can be checked quickly by any member of staff as part of initiating an emergency response
- All pupils to keep their AAI with them this reduces delays and allows for confirmation of consent without the need to check the register.

6.2 Allergic reaction procedures

- As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately
- Emergency response to signs of anaphylaxis is illustrated in appendix 1
- Staff are trained in the administration of AAI to minimise delays in pupil's receiving adrenaline in an emergency
- If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan
- If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one

- If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures
- First steps – First aiders will administer adrenaline first and second dose if required and emergency services will be called immediately (999)
- A school AAI device will be used instead of the pupil's own AAI device if:
 - Medical authorisation and written parental consent have been provided, or
 - The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance, unless advised otherwise by paramedics.
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed

7. Adrenaline auto-injectors (AAIs)

The school follows the Department of Health and Social Care's Guidance on using [emergency adrenaline auto-injectors in schools](#).

7.1 Purchasing of spare AAIs

The School Business Support Manager is responsible for buying AAIs and ensuring they are stored according to the guidance.

- AAIs will be sourced from a trust contact with medical kit (Kitmedical.com)
- Two AAIs required for each age group
- The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of [the guidance](#))

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff always have access, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times

Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAIs)

Student Support Administrator and Senior Pastoral Support Worker are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near

7.4 Disposal

AAIs can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions (for example, in a sharps bin for collection by the local council).

7.5 Use of AAIs off school premises

- Pupils at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on school trips and off-site events
- Trip leaders are responsible for ensuring pupils requiring an AAI have access on a trip or offsite visit

7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils to whom the AAI can be administered
- A record of when AAIs have been administered

8. Training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies

Training will be carried out annually on inset day by the allergy lead.

It's recommended that all staff are trained at least once a year.

9. Links to other policies

This policy links to the following policies and procedures:

- Supporting pupils with medical conditions policy
- Trust Allergy Safety Policy

Appendix 1

The features of an anaphylaxis reaction:

Recognise the signs of anaphylaxis

A AIRWAYS	• Tightening of the throat • Hoarse voice • Difficulty swallowing • Swollen tongue	B BREATHING	• Sudden wheezing • Difficult or noisy breathing • Persistent cough	C CIRCULATION	• Persistent dizziness • Pale or floppy • Suddenly sleepy • Collapse/unconscious
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If any one (or more) of these signs are present: **Don't delay**

- 1 Lie flat with legs raised** (if breathing is difficult, allow to sit)
 ✓  ✓  ✗
- 2 Give adrenaline device without delay** (use the school's spare device if needed)
 Scan this code for instructions on how to use adrenaline devices
- 3 Immediately dial 999** for ambulance and say **ANAPHYLAXIS** (ana-fill-axis)


After giving adrenaline:

- Stay with person until ambulance arrives, do NOT stand them up.
 - Keep them lying down, even if things seem to be getting better.
- Phone parent/emergency contact.



  **If no improvement after 5 minutes, give another dose of adrenaline using a second device, if available.**

Commence CPR at any time if there are no signs of life 

ALWAYS GIVE ADRENALINE DEVICE FIRST if someone has **SEVERE AND SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice). **THEN SEEK MEDICAL HELP. Anaphylaxis can occur without skin symptoms**