



BET Allergy Policy

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Contents

Statement of intent.....	3
1. Aims.....	3
2. Legislation and guidance.....	3
3. Roles and responsibilities.....	3
3.1 Allergy lead.....	3
3.2 School medical/welfare officer.....	4
3.3 Teaching and support staff.....	4
3.4 Parents/carers.....	4
3.5 Pupils with allergies.....	4
3.6 Pupils without allergies.....	5
4. Assessing risk.....	5
5. Managing risk.....	5
5.1 Catering.....	5
5.2 Food restrictions.....	6
5.3 Animals.....	6
5.4 Events and school trips.....	6
6. Procedures for handling an allergic reaction.....	6
6.1 Register of pupils with AAls.....	6
6.2 Allergic reaction procedures.....	7
7. Adrenaline auto-injectors (AAls).....	8
7.1 Purchasing of spare AAls.....	8
7.2 Storage (of both spare and prescribed AAls).....	8
7.3 Disposal.....	8
7.4 Use of AAls off school premises.....	8
7.5 Emergency anaphylaxis kit.....	8
8. Training.....	8
9. Links to other policies.....	9

Statement of intent

Bohunt Education Trust is committed to providing a safe, inclusive, and supportive environment for all pupils, staff, and visitors with allergies and those at risk of anaphylaxis. As an allergy aware Trust, we recognise that severe allergic reactions can be life threatening and require prompt identification and effective management.

1. Aims

This policy aims to:

- Set out the Trust's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- 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
- School Allergy Safety Bill (Benedict's law) 2026

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The BET allergy lead is the Trust Director of Education with responsibilities for students with medical conditions. This individual may delegate to the Director of Safeguarding with advice from the Trust Health and Safety Lead.

Each school has their own designated responsible person.

They're responsible for overseeing:

- 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 may be delegated to the medical officer / the school nurse / administrative staff)

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 pupils at known risk of anaphylaxis, including any pupil prescribed an adrenaline auto-injector or with a written medical plan recommending AAI use, have an Individual Healthcare Plan (IHCP) in place. The IHCP may incorporate the pupil's Allergy Action Plan and must set out

known allergens, symptoms, medication, AAI location, emergency response, consent for use of the school's spare AAI, off-site arrangements, and review date.

- 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 local allergy procedure

3.2 School medical/welfare officer

The school medical/welfare officer is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the designated responsible person

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

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of the school's allergy procedures
- 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

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 separate risk assessment for any pupil at risk of anaphylaxis taking part in:

- Food Technology lessons
- Science lessons (including experiments involving foods)
- Other Lessons where applicable
- Art or other crafting activities using food packaging
- Off-site events, school trips and clubs
- Any other activities that may involve exposure to allergens. Including but not limited to, activities or experiences 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

At BET we employ external contract catering providers who are responsible for the safe management of allergens within catering operations. Catering teams are expected to maintain appropriate allergen management procedures, staff training, food labelling, and controls to minimise the risk of allergic reactions and cross-contamination. Further information regarding Accent Catering's approach to allergen management can be found on the [Accent Catering website](#) and within their published allergen information and procedures.

Each school remains responsible for ensuring that pupils with allergies are appropriately supported and that safe food options are available to meet their dietary needs.

- 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 reduce the risk of cross-contamination.

5.2 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to 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 Animals

Refer to school local procedures and risk assessments for interaction with animals

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will not interact with animals

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.

Educational visits and trips are managed through the Evolve system. Pupils identified as being at risk of anaphylaxis will have an Individual Healthcare Plan (IHCP) in place, and relevant medical information, control measures, and emergency arrangements will be incorporated into the visit risk assessment

The school will plan accordingly and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAls

The school maintains a register of pupils who have been prescribed AAls or where a doctor has provided a written plan recommending AAls to be used in the event of anaphylaxis. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAl(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 should also include a recent photograph of the student, where parental consent has been obtained, to support rapid identification in an emergency.
- Any pupil included on the AAI register must also have an IHCP in place, or an IHCP must be initiated urgently where a newly identified risk is reported.

Allowing all pupils to keep their AAI with them will reduce delays and allows for confirmation of consent without the need to check the register.

Refer also to the BET Supporting Children with Medical Conditions and Administration of Medicines Policy

6.2 Allergic reaction procedures

As part of the whole-school approach to allergy awareness, all staff are trained in the school's allergic reaction procedure, including how to recognise the signs of anaphylaxis and respond appropriately.

- Staff are trained in the administration of adrenaline auto-injectors (AAIs) to minimise delays in pupils 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 where one is in place.
- If anaphylaxis is suspected, staff must treat this as a medical emergency. The pupil's own prescribed AAI should be administered without delay, where immediately available, and 999 called as soon as possible, stating "anaphylaxis".
- Where the pupil's own AAI is not immediately available, has expired, misfired, broken or already been used, the school's spare AAI may be used for a pupil known to be at risk of anaphylaxis where medical authorisation and written parental consent are recorded in the pupil's IHCP, allergy action plan or AAI }.
- Action in an emergency If an individual (whether a child, young person, member or staff or visitor) experiences a life-threatening medical emergency, anyone – staff, volunteers or bystanders – may take reasonable action to save their life. The law recognises that rescuers act under extreme pressure. People who attempt to save a life in good faith are protected, even if an injury occurs while giving emergency care (for example, broken ribs during CPR are common and not a sign of wrongdoing). This includes administering adrenaline when an individual is suffering anaphylaxis. Staff in schools, colleges and early years settings should be reassured that mistakes, hesitation, or imperfect technique do not amount to serious and wilful misconduct. The expectation is simply that staff act reasonably, to the best of their ability, in an emergency.
- Where a severe allergic reaction is suspected in a pupil not known to be at risk of anaphylaxis, staff should call 999 immediately and seek advice on whether use of the school's spare AAI is appropriate.

- If the pupil has no allergy action plan, staff will follow the school's local allergy procedure and normal emergency procedures.
- 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.
- If the allergic reaction is mild, for example skin rash, itching or sneezing, the pupil will be monitored closely in case symptoms progress, and parents/carers will be informed.

7. Adrenaline auto-injectors (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, set out our school's procedures for AAIs, covering these areas:

7.1 Purchasing of spare AAIs

The schools designated responsible person is required to organise spare AAIs and ensuring they are stored according to the guidance.

Refer to local allergen procedure for details.

7.2 Storage (of both spare and prescribed AAIs)

The medical 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 have access at all times, but is out of the reach and sight of children
- Not locked away, but accessible and available for use at all times
- Larger schools may require more than one AAI kit, ideally located near the dining area and playground, further details specified in the school's local allergy procedure

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

7.3 Disposal

AAIs can only be used once. Once an 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).

7.4 Use of AAIs off school premises

Pupils at risk of anaphylaxis who can administer their own AAIs should carry their own AAI with them on school trips and off-site events

Refer to individuals Allergy Action Plans for arrangements for taking spare AAIs for emergency use on school trips and off-site events

7.5 Emergency anaphylaxis kit

The school must hold an emergency anaphylaxis kit.

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 AAls are kept on the school site, and how to access them
- How to administer AAls
- The wellbeing and inclusion implications of allergies

Training will be carried out annually to all staff. Student awareness will be raised annually.

9. Links to other policies

This policy links to the following policies and procedures:

- BET Health and Safety Policy
- BET First Aid Policy
- Supporting Children and young people with Medical Conditions and Administration of Medicines Policy

Document Control Record			
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