07.10.26

Allergy and Anaphylaxis Policy

Flagg Nursery School

Health, Safety & Wellbeing Guidance – Schools

Adopted at the meeting of the Full Governing Body on: 07.10.26
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Record of Policy Amendment / History

Version / Issue	Date	Author	Reason for change
1	July 2026	Sally Longley (SBO) Sarah Brown (HT)	New policy was created in line with DfE Allergy Safety in Schools statutory guidance 2026 and local nursery arrangements.

Policy links

Policy status	Statutory / health and safety
Review frequency	Annually or sooner following incident, legislative change or revised guidance
Policy owner	Headteacher
Applies to	Children, staff, volunteers, students, visitors and contractors, where relevant
Related documents	Administration of Medicines Policy; Supporting Pupils with Medical Conditions; Health and Safety Policy; Educational Visits; Food Policy; Safeguarding and Child Protection

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1. Policy Statement

It is the policy of Flagg Nursery School to provide a safe, inclusive and supportive environment for children with allergies, including children at risk of anaphylaxis.

Allergic reactions can be life-threatening. The school will take reasonable steps to reduce the risk of exposure to known allergens, to identify children who require additional support, and to ensure that staff are able to respond promptly and appropriately in an emergency.

This policy is written in line with the Department for Education Allergy Safety in Schools statutory guidance 2026 and should be read alongside the school's Administration of Medicines Policy and any Individual Healthcare Plan for the child.

Signed ***Headteacher***

Signed ***Chair of Governors***

2. Scope and Definitions

This policy applies to the whole nursery day, extended activities, educational visits, Forest School, events, visitors and any food-related or curriculum activity organised by the school.

- **Allergy:** an immune system response to a substance that is normally harmless.
- **Allergen:** the substance that triggers an allergic reaction.
- **Anaphylaxis:** a severe, potentially life-threatening allergic reaction requiring immediate emergency response.
- **AAI:** adrenaline auto-injector, such as EpiPen, Jext or Emerade.
- **IHP:** Individual Healthcare Plan for a child with medical needs, including allergy arrangements.

3. Legislative and Guidance Framework

This policy has regard to the following legislation and guidance:

- Allergy Safety in Schools Statutory Guidance, Department for Education, July 2026.
- Children and Families Act 2014, Section 100: supporting pupils with medical conditions.
- Supporting pupils at school with medical conditions statutory guidance.
- Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999.
- Food Safety Act 1990 and Food Information Regulations 2014.
- Food Information (Amendment) (England) Regulations 2019, commonly known as Natasha's Law.
- Equality Act 2010, including reasonable adjustments for children with medical needs or disabilities.

4. Roles and Responsibilities

Governing Body

- To review this policy annually, or more frequently if required, and ensure it remains relevant, proportionate and up to date.
- To support the Headteacher and staff in implementing this policy and making appropriate resources available.
- To ensure the key information for parents and carers is communicated through appropriate school channels, such as starter information, newsletters and the school website.
- To monitor serious incidents, near misses and any learning identified through policy review.

Headteacher

- To be responsible for the day-to-day implementation of this policy in school.
- To ensure an allergy register is maintained, accessible to relevant staff and updated when information changes.
- To ensure Individual Healthcare Plans (IHPs) are completed where required and shared with relevant staff.
- To ensure staff receive allergy awareness training and emergency response guidance.
- To ensure safe storage, checking and replacement of spare AAIs.
- To ensure incidents and near misses are recorded and reviewed.

All staff

- To be familiar with this policy and with the needs of children in their care who have allergies.
- To follow Individual Healthcare Plans, risk assessments and agreed emergency procedures.
- To complete relevant training and raise concerns promptly.
- To take reasonable steps to reduce allergen exposure during snack, lunch, cookery, craft, outdoor learning and visits.
- To report all allergic reactions, use of emergency medication and near misses.

Parents and carers

- To provide accurate and up-to-date information about allergies, symptoms, medication and emergency contacts.
- To provide medication in date, in the original container and labelled for the child, where prescribed.
- To provide written consent and medical authorisation where required, including for emergency AAI arrangements.

- To advise the school immediately of any changes in diagnosis, treatment, medication or emergency advice.

Children

- Children will be supported in an age-appropriate way to recognise safe food and not to share food, cups, cutlery or bottles.
- Due to the age of children at Flagg Nursery School, children will not be expected to manage allergy risk independently.

5. Identification of Children with Allergies

When a child joins the nursery, parents and carers will be asked to declare any allergy, previous allergic reaction, previous anaphylaxis, medication, dietary requirement or relevant medical advice. Information will be checked and updated at least annually and whenever parents or carers provide new information.

- Food allergies, including milk, egg, peanuts, tree nuts, sesame and other allergens.
- Insect sting allergies.
- Medication allergies.
- Latex or rubber allergy.
- Environmental allergies, including pollen, animal dander or other triggers.

Where an allergy creates a significant risk to health, participation or wellbeing, the school will complete an Individual Healthcare Plan and, where appropriate, a risk assessment.

6. Individual Healthcare Plans (IHPs)

An IHP will be created for any child whose allergy requires specific arrangements. The plan will be agreed with parents/carers and, where appropriate, informed by medical advice.

- The child's known allergens and possible routes of exposure.
- Usual symptoms and warning signs for the child.
- Medication and dose, including where medication is stored.
- Emergency procedure, including when to administer adrenaline.
- Consent for emergency medication and use of spare AAI, where applicable.
- Arrangements for snack, lunch, school events, Forest School and visits.
- Names of staff trained or briefed on the plan.
- Review date and trigger points for earlier review.

Nursery-specific note

At Flagg Nursery School, medication will be managed by adults. Children will not be expected to self-carry or self-administer emergency medication.

7. Allergy Register

The nursery school will maintain an allergy register. This will identify children with allergies and the key information staff need to keep children safe. The register will be stored securely electronically but will be available to staff who need it for safeguarding, health and safety or emergency response purposes.

- The register will be checked before food activities, special events and educational visits.
- Confidentiality will be balanced with the need for relevant staff to know how to keep children safe.
- Supply, students, and volunteer staff will be informed of relevant allergy information for the children they work with.

8. Risk Assessment and Prevention

Allergens are recognised as a foreseeable and potentially fatal risk. The nursery school will consider where and how exposure could occur and will put reasonably practicable controls in place.

- Identify hazards: where allergens may be present, such as food, craft materials, celebrations, packed lunches, cooking activities, sensory play or outdoor learning.
- Estimate who may be affected and how.
- Evaluate controls, including supervision, cleaning, ingredient checks, separation of food, communication and emergency medication access.
- Record significant findings where risks are specific or heightened.
- Review assessments regularly and following any incident, near miss or change in circumstances.

9. Food and Catering Arrangements

The nursery school will take reasonable steps to reduce allergy risk during snacks, lunches, food preparation, cooking activities and celebrations.

- Maintain accurate allergen information for food provided by school.
- Check ingredient labels and allergen information regularly.
- Never assume a product remains unchanged; ingredients can change without obvious packaging changes.
- Confirm substitutions before use.
- Reduce cross-contamination through cleaning, handwashing, separate utensils/equipment where needed and clear supervision.
- Ensure children do not share food, drink bottles, cups, cutlery or plates.
- Seek parent/carer agreement before providing party food, baking, treats or food linked to celebrations.

Important

The school will take reasonable steps to manage risk but cannot guarantee that the school environment or food items will be completely free from allergens.

10. Communication

Clear communication is essential to allergy safety. The school will communicate relevant information to staff, parents/carers and, where appropriate, visitors.

- Parents/carers will be reminded to keep allergy and emergency contact information up to date.
- Staff will be briefed on children with allergy needs and the location of medication.
- Relevant information will be included in risk assessments for visits and activities.
- Parents/carers will be informed of arrangements for food-based events or activities.
- The policy will be published or made available through appropriate school communication channels.

11. Training

All staff will receive allergy awareness training appropriate to their role. Training will be recorded and completed annually, or sooner if there is a significant change in guidance, staffing, medication or pupil need. Training will include:

- Understanding allergies, allergens and routes of exposure.
- Recognising mild, moderate and severe allergic reactions.
- Recognising anaphylaxis using airway, breathing and circulation warning signs.
- Knowing where medication and spare AAIs are stored.
- Emergency response, including calling 999 and administering an AAI.
- Safe practice for food, cleaning, handwashing, curriculum activities and visits.
- Individual Healthcare Plan requirements for specific children.
- Understanding how to report an allergic reaction or case of anaphylaxis (incidents and near misses)

Supply staff, volunteers and students will receive relevant allergy information before working with children.

12. Adrenaline Auto-Injectors (AAIs)

The school will maintain arrangements for prescribed AAIs and spare AAIs in line with current national guidance and local authority/insurance expectations.

- AAIs will be stored at room temperature, away from direct sunlight and in line with manufacturer instructions: In office cupboard.
- AAIs will be clearly signposted and accessible to staff in an emergency while remaining secure from inappropriate access by children.

- At least two named members of staff will check expiry dates and condition of spare AAIs (Headteacher and SBO)
- A record of checks will be maintained electronically.
- Spare AAIs may be used only where permitted by current guidance, medical authorisation and written parental consent, unless emergency guidance permits otherwise.
- AAIs used in an emergency will be disposed of safely in line with sharps arrangements and replacement stock will be obtained promptly.

Emergency principle

If anaphylaxis is suspected, staff should act immediately. Delay in administering adrenaline can increase risk. Emergency services must be called whenever adrenaline has been administered.

13. Recognising Allergic Reactions and Anaphylaxis

Mild to moderate symptoms	Severe symptoms / possible anaphylaxis
Itchy skin or rash/hives Swelling of lips, face or eyes Tingling or itching in the mouth Stomach pain, nausea or vomiting Behavioural changes or distress	Difficulty breathing or wheezing Swelling of tongue or throat Difficulty swallowing or speaking Persistent cough or hoarse voice Dizziness, fainting or collapse Pale, clammy skin or confusion Loss of consciousness
Monitor closely and follow the child's IHP. Seek advice if symptoms progress.	Treat as a medical emergency. Administer AAI and call 999.

14. Emergency Procedure for Suspected Anaphylaxis

1. Stay calm and send for help immediately. Do not leave the child alone.
2. Lay the child flat with legs raised if possible. If breathing is difficult, allow the child to sit. Do not make the child stand or walk.
3. **Administer the child's prescribed AAI immediately, or a spare AAI where permitted.**
4. **Call 999 and say: "Anaphylaxis".**
5. Stay with child until ambulance arrives, do NOT stand them up. Keep them lying down, even if things seem to be getting better.
6. Contact parents/carers as soon as possible after emergency services have been called.

7. Record the time the AAI was administered. Keep the used device to give to ambulance staff or dispose of it safely as advised.
8. If symptoms do not improve or return, administer a second AAI after the interval advised in current guidance or the child's care plan.
9. Continue to monitor airway, breathing and circulation until emergency services arrive.
10. The child must be assessed by medical professionals even if symptoms improve.
11. Commence CPR at any time if there are no signs of life

15. Educational Visits, Forest School and Off-site Activities

Allergy safety arrangements will be considered before educational visits, Forest School and off-site activities.

- Review the child's IHP and allergy register.
- Complete a risk assessment proportionate to the activity.
- Ensure medication, including AAI where required, accompanies the child and remains accessible.
- Ensure staff supervising the child know what to do in an emergency.
- Check food, packed lunch, external provider and venue arrangements where relevant.
- Ensure there is a working method of contacting emergency services and parents/carers.

16. Visitors, Contractors and Events

The school will consider allergy risks linked to visitors, contractors, fundraising events, celebrations, food brought into school and activities organised by external providers.

- Food brought into nursery must be agreed with staff in advance where it could affect allergy safety.
- Visitors and providers will be informed of relevant restrictions or controls where necessary.
- The school may restrict or refuse food or materials where allergy risk cannot be managed safely.

17. Inclusion and Reasonable Adjustments

Children with allergies will not be unfairly excluded from nursery life. Reasonable adjustments will be made to enable safe participation in activities, visits, events, snack, lunch, play and learning.

Any adjustment will be balanced with the school's duty to take reasonable steps to protect the child and others from foreseeable risk.

18. Incident, Near Miss and Learning Review

All allergic reactions, suspected allergic reactions, anaphylaxis, administration of emergency medication, medication errors and relevant near misses must be recorded and reported to the Headteacher.

- What happened and when.
- The child involved and staff present.
- Possible trigger or exposure route.
- Symptoms observed.
- Medication administered and time given.
- Emergency services and parent/carer communication.
- Actions taken to prevent recurrence.

Serious incidents and learning points will be shared with the Governing Body as appropriate, while maintaining confidentiality.

19. Record Keeping

The school will maintain records to evidence safe management of allergy arrangements.

Record	Purpose	Minimum review / update
Allergy register	Identifies children with allergies and key controls	When information changes and at least annually
Individual Healthcare Plan	Child-specific arrangements and emergency plan	Annually and after changes/incidents
Medication/AAI check record	Shows stock, expiry and condition checks	Monthly, or more often if required
Training record	Shows staff awareness and role-specific training	When training occurs and at review
Incident/near miss form	Records events and learning	Immediately following event

20. Monitoring and Review

This policy will be reviewed annually, following any significant allergy incident or near miss, and when legislation, statutory guidance or local arrangements change.

The Governing Body will monitor implementation through its health, safety, safeguarding and policy review arrangements.

Appendix 1: Allergy Declaration Form and Consent for AAI Administration

1.a: Allergy Declaration Form: Flagg Nursery School 2627 – Fill in form

1.b: Consent for Administration of Spare Adrenaline Auto-Injector (AAIs): Flagg Nursery School – Fill in form

Appendix 2a: Allergy Register Template (key information for staff)

Stored electronically and printed for green folder in office accessible to all relevant staff.

Child first name	Child surname	Allergen(s)	Symptoms / risk	Medication / Adrenalin Auto-injector (AAI)	IHP in place	Key controls / notes

Appendix 2b: Allergy Register Template (detailed information)

Stored electronically in Office SharePoint

Excel spreadsheet contains:

- Name and DoB of child and parent/carer contact details
- GP
- Information on Medication, Nature of allergy, Known allergens, Severity of allergy

- Risk factors for anaphylaxis, Symptoms of an adverse reaction, Details of medical attention required
- Instructions for administering medication (dosage, etc), control measures to avoid an adverse reaction, authorisation for medical intervention, written parental consent received
- Information added to Arbor Management Information System (yes and date)

Appendix 3: AAI Monthly Check Record

Stored electronically and printed for green folder in office accessible to all relevant staff.

Name	Detail	Dose	Date purchased	Serial number / Lot	Expiry Date	Initials: checked and date (storage and condition)

Appendix 4: Individual Healthcare Plan – Allergy Summary

Template A: individual healthcare plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Emergency instructions

- Follow the child's allergy action plan and this policy.
- If anaphylaxis is suspected, administer AAI and call 999 immediately.
- Record time of administration and hand used device to ambulance crew or dispose of safely as advised.

Appendix 5: Allergy Incident / Near Miss Form

Date and time of incident	
Child / person involved	
Location	
Known allergy?	Yes / No / Unknown
Suspected trigger	
Symptoms observed	
Action taken	
Medication administered	AAI / antihistamine / inhaler / other / none
Time medication given	
999 called?	Yes / No
Parent/carer contacted	Yes / No / time
Staff involved	
Learning points / actions	
Reported to Headteacher	Yes / No
Governor / LA / RIDDOR notification considered	Yes / No / Not applicable

Appendix 6: Allergy Risk Assessment Prompt Sheet

Activity / area	Possible allergen risk	Control measures	Review / action
Snack / lunch	Food ingredients, cross-contact, sharing food		
Cooking / baking	Ingredient changes, flour dust, milk/egg/nut/sesame exposure		
Craft / sensory play	Food packaging, pasta, lentils, latex, recycled materials		
Forest School / outdoor learning	Insect stings, plants, snacks and hand hygiene		
Visits / events	Venue food, external providers, emergency medication access		

Appendix 7: Useful Links and References

- Department for Education: Allergy Safety in Schools statutory guidance, July 2026.
- Department for Education: Allergy Safety Policy template, July 2026.
- Department for Education: Individual Healthcare Plan template.
- Guidance on the use of adrenaline auto-injectors in schools.
- Anaphylaxis UK and Allergy School resources
- Governor checklist