

Sheringham Woodfields School



Sheringham Woodfields School
Holt Road
Sheringham
Norfolk
NR26 8ND

ANNETTE MACONCHIE
Head Teacher

Telephone: 01263 820 520

Fax: 01263 820 521

Email: office@sheringhamwoodfields.norfolk.sch.uk

STEVE THURLOW
Chair of Governors

Website: www.sheringhamwoodfields.norfolk.sch.uk

Registered Charity: Friends of Sheringham Woodfields School - 1127142

Allergy Awareness Policy	
Approved by SMT: September 2026	Approved by Governors: November 2026
Next Review date: Autumn 2027	Person(s) responsible for review: SENCo

Statement of intent

At Sheringham Woodfields School we are committed to promoting a whole school approach to health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way. By our actions we will work proactively to:

- minimise the risk of exposure within the school setting
- encourage self-responsibility
- learn avoidance strategies
- have robust plans for an effective response to possible emergencies
- ensure inclusivity for all pupils

Sheringham Woodfields School is clear about the need to actively support pupils with medical conditions to participate in school life. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all aspects of school life. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Benedict's Law is designed to protect **children and young people with allergies** in educational settings. This policy will support both pupils and members of staff.

Content

Food allergies are increasing in both developed and developing countries, especially in children and the severity and complexity of food allergy is also increasing. Food allergy can be fatal and an appropriate diagnosis is essential in parallel with the need for clear food labelling worldwide. Around 5-8% of children in the UK live with a food allergy and most school classrooms will have at least one allergic pupil. These young people are at risk of anaphylaxis, a potentially life-threatening reaction which requires an immediate emergency response. 20% of severe allergic reactions to food happen whilst a child is at school and these reactions can occur in children with no prior history of food allergy. It is essential that staff recognise the signs of an allergic reaction, symptoms and are able to manage it safely and effectively. Schools have a legal duty to support pupils with medical conditions, including allergy.

Principles

- To comply with all relevant environmental legislation, regulations and requirements.
- To encourage proactive steps to keep pupil/students safe.
- To ensure pupils/students from diverse backgrounds, ethnicities or different cultural heritages are not disadvantaged when dealing with allergies and food labelling.
- To work with the catering provider/team to establish a robust process and documentation for menu planning, food labelling, storing, avoidance of cross-contamination, stock ordering of food/drink used at the school.
- To provide an effective staff awareness programme on food allergies and intolerances, possible symptoms (anaphylaxis) recognition and actions to take.
- To develop a pupil awareness programme through PHSE and other curriculum areas.

Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- The Food Information Regulations 2014
- Natasha's Law
- Children and Families Act 2014 (Section 100)
- Children's Wellbeing and Schools Act 2026
- Allergy Safety in Schools Statutory Guidance (DfE, July 2026)
- Benedict's Law (Sept 2026)

This policy operates in conjunction with the following school policies:

- Medications Policy
- Safeguarding Policy

Roles and responsibilities

The Governing Board will be responsible for:

- Ensure the school has a strategic vision for the management of allergy risk assessment and emergency procedures.
- Delegate the day-to-day responsibility for the effective delivery of this Policy to the Headteacher.
- Ensure the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy, are robust and effective.
- Ensure that the school provides appropriate training, information, instruction, induction and supervision on a regular basis to enable everyone to stay safe regarding allergies and their management. It is good practice to log all training and attendees.
- Ensure adequate resources for managing allergies are available.
- Ensure appropriate material is available on the school website for parent/carers highlighting how the school is managing pupils/students with allergies.
- Monitor the effectiveness of this Policy to ensure it remains fit for purpose.
- A named Governor, Jade Brown, will provide strategic oversight of allergy safety arrangements, monitoring policy implementation, training compliance, incident reporting and annual review.

The Head Teacher will be responsible for:

- The Headteacher will appoint a named Senior Leader with operational responsibility for allergy safety across the school. This will be Nicola Stewart, Assistant Head and SENCo
- Provide, as far as practicable, a safe and healthy environment in which people at risk of allergic reaction and anaphylaxis can participate equally in all aspects of school life and are not subject to bullying because of their condition.
- Ensure all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitment to allergy management as part of Safeguarding. Supply staff, agency staff, temporary staff and volunteers will receive information regarding pupils with severe allergies and emergency procedures before working with pupils.

- Ensure the curriculum contains age-appropriate content so all pupils/students can learn about allergies and how everyone can support those who have them.
- Create links at strategic level with Healthcare professionals and Catering providers and ensure at operational level that links are robust.
- Ensure that up-to-date allergy information for pupils/students is accessible to catering teams.
- Ensure there is a workable School Emergency Plan in place that is known by all staff.
- Ensure the school sends a copy of the medical details it holds for the child to parents/carers for review and update at the end of each school year. Seek updated medical information at the commencement of each calendar year and for any pupil/student joining in year.
- Where the pupil/student has an Individual Healthcare Plan (IHP), ensure the involvement of, teaching and catering staff, parents/carers and the pupil/ student in establishing IHPs.
- Where the pupil has a life-threatening anaphylaxis an Allergy Action Plan (AAP) needs to be in place along with the IHP, written and signed by a health care professional and signed by parents/carers and school. It must be kept with their medication with copies made available for all staff to access and help the school support the pupil.
- Ensure effective communication of individual pupil medical needs to all staff and that they know how and where to check for updated information.
- Ensure there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff absences away from the school premises.
- Ensure First Aid staff training includes anaphylaxis management, including awareness of triggers, anaphylaxis and first aid emergency procedures.
- Ensure an adequate risk assessment is undertaken prior to any school trips, excursions or off-site extra curricula activities for pupils/students who have allergies.
- Ensure records of pupils/students medically prescribed an AAI (Adrenaline Auto-Injectors) and its use are kept correctly.
- Ensure pupil/student documentation and in date medication is kept correctly and safely.
- Ensure best practice in the labelling of foodstuffs and their contents.
- Report to the Board of Governors regarding the management of allergies within the school.

The member of Staff responsible for medical needs will:

- Follow all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context.
- Maintain an up-to-date Allergy Register containing:

*pupil name

*allergens

*prescribed medication

*location of medication

*healthcare plan status

*emergency contacts

The register will be reviewed regularly and updated whenever new information is received.

- Report to the Head regarding pupils with allergies.
- Lead on the training of staff regarding allergy medical needs and their identification and management.
- Work closely with in-house and sub-contracted Catering Team in assisting in the support of pupils with known allergies (including meeting with parents/carers where requested) to discuss any special requirements.
- Monitor where there is a school snack provision, other provided items or home baked items are brought into school.
- Liaise with parents/carers of pupils with known declared allergies to produce a risk assessment for their child that includes sharing of information, allergy management, risk minimisation and emergency actions.
- Wherever possible use an emergency healthcare plan for pupils with recognised allergies and keep it with their medication. Ensure copies of the emergency care plan are available for all staff to access.
- Ensure all copies of the emergency healthcare plan is located around the school and/or on IT systems are identical if an updated version is received.
- Where an emergency healthcare plan has not been received for a pupil with recognised allergies, or if the medication information is not clear, liaise with GP/school nursing team, to obtain an up to date copy and/ or clarification.
- Ensure medication is stored in emergency bag and clearly labelled with the pupils name and stored in medication stores within classroom or with the pupil if moving around school/off site.
- Be trained in the use of an Adrenaline Auto-Injector (AAI) and be competent in performing any possible required prescribed medical treatment as outlined in the pupils' emergency healthcare plan.
- Ensure that any other staff involved with those pupils/students requiring the use of an AAI are also adequately trained and competent.

- Ensure all school trips, excursions or off-site extra curricula activities for pupils are pre-checked so that 'safe' food is provided or that an effective control is in place to minimise risk of exposure for pupils with allergies.
- Ensure the school has an audited spare supply of in date AAIs that are kept in a safe space at room temperature that is accessible, secure but not locked away and all staff are aware of the location.
- Monitor the use of all AAIs to ensure they are within the expiry date including those brought into the school by pupils or external sources and are of the correct dosage.
- Arrange for the correct disposal of out-of-date AAIs.
- Where anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state ANAPHYLAXIS is suspected, then follow their advice as to whether administration of a spare AAI is appropriate.
- Record all emergency uses of AAIs or reports of suspected emergencies.
- Ensure that, if a pupil notifies school that they are no longer allergic to a food, this information is checked prior to updating records and the emergency healthcare plan (if applicable).
- Undertake periodic audits of: (Findings will inform policy review and school improvement planning.)
 - *staff training completion (6 monthly)
 - *medication expiry dates (monthly)
 - *availability of healthcare plans (annually)
 - *emergency response arrangements (annually)
 - *spare AAI provision (termly)

All staff members will be responsible for:

- Follow as directed all the requirements of the school, including all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context.
- Complete appropriate anaphylaxis training and be confident to respond to an allergy emergency.
- Raise awareness about allergies and anaphylaxis amongst their pupils in the classroom and around school, especially in dining area.
- Encourage self-responsibility and learned avoidance strategies amongst pupils living with allergies.

- Help all pupils understand which foods are safe for those with allergies and how they can support other pupils with specific dietary needs to stay safe.
- Highlight the need for anti-bullying of pupils with the condition.
- Be aware of the pupils in their care (including regular cover classes) who have known allergies as an allergic reaction could occur at any time, not just at breaks or mealtimes.
- Any food-related activities must be supervised with due caution whilst following best practice for storing, preparing, cooking and serving food.
- Any staff leading on a school trip must check that all pupils with medical conditions, including allergies, are carrying their medication (those unable to produce their required medication would not be able to attend the excursion).
- Staff leading a school trip, excursion or off-site extra curricula activity including short breaks must ensure they carry all relevant emergency supplies with them.

Pupils (as appropriate) will be responsible for:

- Have a good awareness of their allergy and support the knowledge of peers in helping keep them safe.
- Be proactive in the care and management of their food allergies and reactions and medication.
- Be sure not to exchange food with others and take care to avoid any foods which may cause an allergic reaction.
- Read food labelling but, if unsure, avoid the food.
- Avoid eating anything with unknown ingredients.
- Know where their medication is kept and (if age appropriate and confident enough to administer their own auto-injectors) take responsibility for carrying AAIs on their person at all times.
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult.

Parents/Carers will be responsible for:

- Notify the school of the pupil's allergies.
- Inform the school of any changes as soon as known.
- Provide an emergency healthcare plan completed by a healthcare professional that can be kept with their medication and help the school support the pupil.
- Contribute to the provision of an emergency healthcare plan in partnership with the school, and relevant healthcare professional, where required.
- Provide any other written medical documentation, instructions and medications as directed by a health professional.

- If you require it, meet with the Catering Team to discuss any specific requirements relating to your child's allergy (information from these meetings will be recorded by the Catering Team).
- Be aware of the school Allergy Policy and any arrangements for managing children with allergies and at risk of anaphylaxis.
- Communicate regularly with the school to support our ability to keep our children safe and act immediately in the event of an allergic reaction.
- Provide appropriate in date medication (two AAIs) of the correct dosage and register their AAIs on the manufacturer's websites to receive text alerts for expiry dates.
- Providing appropriate foods to be consumed by the child if necessary.
- Replace medications after use or upon expiry.
- Review the Policy and procedures with the school's Head and/or Member of Staff responsible for medical needs, the pupil's doctor and the pupil (if age appropriate) after a reaction has occurred.

Supply and Storage of Medications

All medication will be stored in a named bag within the medication cupboards in classrooms, or carried by the pupil or an identified member of staff when moving around the school or on school trips. The pupil's medication bag should contain:

- Two AAIs i.e. EpiPen® or Jext.
- An up-to-date allergy action plan.
- Antihistamine as tablets or syrup (if included on allergy action plan)
- Spoon if required.
- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the School SENCO and a member of the office team will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry. Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes. Disposal AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a clinical waste contractor/specialist collection service/ local authority (delete as appropriate). The sharps bin is kept in the cupboard next to the main office.

Spare AAI's

The school has spare Adrenaline Auto-Injectors (AAIs For children and adults at risk of anaphylaxis). Immediate access to an AAI can be life-saving. While it's vital that families have their own prescribed AAIs for their child, having spare AAIs at school adds an extra layer of reassurance for everyone involved. It's a step towards creating a safer and more inclusive environment for children managing severe allergies.

Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. The school menu is available for families to view for a whole term in advance with all ingredients listed and allergens highlighted on the school website. The SENCO/Office will inform the Catering Team of pupils with food allergies. Parents/carers are required to complete a dietary requirements form listing their child's needs. The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended. This should be marked on the bottle and/or lunch box with a label or indelible pen.
- If food is purchased from the school canteen, parents should check the appropriateness of foods by speaking directly to the school office.
- The pupil should (if appropriate) be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments, messy play and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

Allergy Risk Assessment

The School will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping allergic children safe.

Allergy Action Plan

All pupils with a diagnosed allergy that presents a significant risk to health, including those at risk of anaphylaxis, will have an Allergy Action Plan (AAP) and an Individual Health Care Plan (IHP).

The AAP will be developed in partnership with parents/carers, the pupil (where appropriate), healthcare professionals and school staff.

AAPs will be reviewed:

- at least annually
- after any allergic reaction requiring treatment
- following changes in diagnosis or treatment

Individual Health Care Plans

All pupils with an allergy will have an IHP. These are written by school in partnership with parents/carers, the pupil (where appropriate) and school staff. They will cover the daily school arrangements and non-life threatening needs.

Incident Reporting and Learning

All allergy-related incidents, suspected anaphylaxis events, administration of emergency medication and significant near misses will be recorded.

Following any serious incident or near miss:

- a review will be undertaken
- parents/carers will be involved
- relevant staff will contribute
- lessons learned will be identified
- risk assessments and healthcare plans will be updated where necessary

A summary of significant incidents and actions taken will be reported to Governors.

Training

Allergy training will be completed by all staff through KITT training. Training will include a basic understanding of allergic disease and its risks which include:

- Knowing the common allergens and triggers of allergy.
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services.
- Administering emergency treatment (including AAIs) in the event of anaphylaxis - knowing how and when to administer the medication/device.
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance.
- Knowing who is responsible for what.
- Associated conditions e.g. asthma.
- Managing Allergy Action Plans and ensuring these are up to date

KITT Medical Training, covers the above but also details how to use their product and what to do afterwards for debriefing, reporting and counselling.



anaphylaxis UK

Be Allergy Aware & Save a Life

Anaphylaxis is a serious and life-threatening reaction to allergens such as food, insect stings, medication and latex.

In the event of a serious allergic reaction, time is critical.

What to do in an emergency

Get in position



Lay the person flat and raise their legs - do NOT allow them to stand or walk.

- ! If unconscious, place them in the recovery position
- ! If breathing is difficult, they can be propped up with legs stretched out straight

Give adrenaline immediately



Administer adrenaline without delay (use prescribed AAI or intranasal EURneffy) Refer to device label for instructions.

- ! Note the time that the first dose of adrenaline is given
- ! ALWAYS carry two in-date adrenaline devices, as a second dose may be needed

Call 999

Call emergency services immediately and tell the operator it is "anaphylaxis" **(ana-fil-ax-is)** Give your exact location (What3Words can help if you are outside). Stay with the person until emergency services arrive.

Do not move

! Stay lying flat or propped up until help arrives. Do not stand up, walk or run, even if you start to feel better. Movement can make symptoms worse and cause a sudden drop in blood pressure.



Give second dose of adrenaline

If symptoms don't improve after five minutes, or symptoms get worse, a second dose of adrenaline can be given.

www.anaphylaxis.org.uk

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anaphylaxis UK

A brighter future for people with serious allergies

FIRST AID FOR ANAPHYLAXIS



Recognise the Signs of Anaphylaxis...

A Airways

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen tongue

B Breathing

- Difficult or noisy breathing
- Wheeze or persistent cough

C Circulation

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening. Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

ANAPHYLAXIS: ACTIONS TO TAKE

If any one or more of the above ABC symptoms are present, take these steps.

1. Administer an Adrenaline Auto Injector (AAI) without delay

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, give the AAI, it will not harm them.



2. Dial 999 and say anaphylaxis ('ana-fill-axis')

Stay with the person until the ambulance arrives. DO NOT let them stand up and walk around.



3. The person should lie down immediately

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.



4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes

If there is no sign of life, start CPR immediately until help arrives.

Please learn these steps. This is life-saving information. You never know when you will need to act in an anaphylaxis emergency.