LEICESTER GRAMMAR SCHOOL TRUST

Policy and procedures for the management of pupil allergies

This policy refers to the whole Leicester Grammar School Trust (LGST) incorporating Leicester Grammar School (LGS), Leicester Grammar Junior School (LGJS) and Leicester Grammar School Stoneygate (LGSS). It should be read in conjunction with each individual school's first aid and administration of medicines policy.

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, the Children's Wellbeing and Schools Act 2026, and the DfE's Allergy Safety in Schools statutory guidance published in July 2026. The policy also reflects the principles and expectations arising from "Benedict's Law", which established strengthened national expectations for allergy management, staff training, emergency preparedness, individual healthcare planning, and the safe inclusion of pupils with allergies in school life. Please also see the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019
- The Children's Wellbeing and Schools Act 2026
- Allergy Safety in Schools 2026

Aim

This policy aims to:

- Outline the roles and responsibilities of each member of the school community
- Set out the Trust's approach to allergy management, including reducing the risk of exposure and the procedures in place to manage an allergic reaction however severe
- Make clear how the Trust supports pupils with allergies to ensure their wellbeing and, are not disadvantaged in any way whilst taking part in school life.
- Promote and maintain allergy awareness among the school community through publishing on the school website and regular school communications.

Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein; however, most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to): - Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

Roles and responsibilities

Leicester Grammar School Trust takes a whole-school approach to allergy awareness; therefore, every member of the school community has a role to play in ensuring pupils with allergies are well supported and feel safe in school.

Allergy lead

The nominated Trust allergy lead, Julia Parsons, Lead School Nurse, is responsible for:

- Promoting and maintaining allergy awareness across our Trust community
- Overseeing the recording and collating of allergy and special dietary information for all relevant pupils
- Overseeing and ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils with anaphylaxis have an allergy action plan completed by a medical professional
    - All pupils with anaphylaxis have an individual care plan outlining the support provided by the school
    - All staff are aware of the school's policy and procedures regarding allergies
    - The policy is published on the school website
    - The school community are informed via whole school communication
    - 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

The School Nursing Team

The nursing staff allocated to the individual schools are responsible for:

- Liaising with families, collating the relevant paperwork and information, and receiving any prescribed medication
- Ensuring the pupils allergy plans are accessible to the relevant members of staff

- Ensuring the pupils prescribed adrenaline auto-injectors (AAIs) are easily accessible
- Ensuring the wellbeing and inclusion of pupils with allergies
- Ensuring a care plan is written for each child with anaphylaxis outlining the support provided to the child by school.
- Promoting and maintaining allergy awareness among pupils
- Checking spare AAIs are in date and accessible to all staff and pupils
- Maintaining awareness of the allergy policy and procedures

All Trust staff

Staff are responsible for:

- Maintaining awareness of the allergy policy and procedures
- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care as an allergic reaction could occur at any time and not just a mealtime.
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Staff leading school trips to ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

The Trust Catering Team (Sodexo)

The Trust is committed to providing safe food options to meet the dietary needs of pupils with allergies. The catering manager and each individual school's catering allergy champion are responsible for:

- All catering staff receive appropriate training and can identify the pupils with allergies
- Ensuring the school menus are available for parents/carers to view on the website
- Where changes are made to school menus, Sodexo to ensure these continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed allowing pupils and staff to make safer choices.
- Allergen information labelling follows all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- The catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination
- Meeting with parents and pupils to discuss each child's individual allergy needs and their safe management

Parents/carers

Parents/carers are responsible for:

- Being aware of the Trust's allergy policy
- On entry to the school, informing the school nursing team with up-to-date details of their child's medical needs, dietary requirements, prescribed medications and history of allergies, reactions and anaphylaxis
- Supplying a copy of their child's allergy action plan and any associated supporting medical documentation
- Updating the school nursing team on any changes to their child's allergy management as promptly as possible
- Providing their child with 2 in-date adrenaline auto-injectors and any other related medication (such as inhalers and antihistamines), and making sure these are replaced in a timely manner before they expire

Pupils

Pupils are responsible for:

- Being aware of their allergens and the risks they pose
- For Year 7 pupils and above, introducing themselves to school catering staff and checking with them the suitability of food choices when attending Sodexo outlets within school.
- Have a good understanding of their symptoms
- Understand the importance of informing an adult as soon as they suspect they are having an allergic reaction
- Once age-appropriate, gain an understanding of how and when to use their adrenaline auto-injector
- Once age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose
- Pupils without allergies to gain an understanding of allergens and the risks they pose to others.
- Older pupils to gain an understanding of how to support their peers and staff in the case of an anaphylactic emergency.

Training

The Trust is committed to training all staff in allergy response, therefore face to face anaphylaxis training is delivered by the school nurses, which is refreshed every year. Training is also available on an ad-hoc basis for any new members of staff joining the Trust.

Training includes:

- Knowing the common allergens and triggers of allergic reactions
- 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
- The wellbeing and inclusion implications for allergies.

Assessing risk of exposure

The staff member responsible for the activity 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

Managing risk

Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed in Junior school aged pupils. Older pupils should gain an understanding of the importance of asking and checking if a food product is safe for them to consume.
- Pupils should consume drinks from their own water bottles to avoid cross contamination

Food restrictions

LGST supports the approach advocated by Anaphylaxis UK, acknowledging that it is impractical to enforce an allergen-free school. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergies.

Anaphylaxis UK advocates for schools to adopt a culture of allergy awareness and education. A 'whole school awareness of allergies' is an evidence-based approach which reduces the risk of a false sense of security for parents and pupils. It also ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

However, within the junior schools we would like to encourage pupils to avoid certain high-risk foods to reduce the chances of younger pupils who cannot advocate for themselves 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

If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated if the risk to another child is deemed too high.

Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

Animals

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with an animal allergy will not directly interact with the specific animal. An assessment will be conducted and a plan made depending on their individual situation.

Emotional wellbeing support for those with allergies

The Trust is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Pupils with allergies may experience bullying and can also suffer from anxiety and depression relating to their allergy, therefore support will be provided in line with the school's Behaviour Policy and/or Wellbeing Policy as appropriate.

If required, pupils with allergies can receive support through regular check ins with their School Nurse or the Pastoral Team. They can also access further specific support via the school's wellbeing team or counsellor.

School trips and sporting excursions

No pupil with allergies should be excluded from taking part in any events which take place outside of the school

Prior to the trip, all the activities will be risk assessed to ascertain if they pose a threat to pupils with allergies and alternative activities planned to ensure inclusion. Overnight school trips should be carefully planned and a meeting arranged with the trip leader, school nurse and/or parent. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need the appropriate arrangements and management regarding catering (if provided by the venue).

Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion. Staff will also carry all relevant emergency medication supplies such as spare AAIs and antihistamine.

Pupils with allergies should have every opportunity to attend sports fixtures at other schools. The accompanying staff should be fully aware of the situation by using ISAMs, or SOC's. A member of staff trained in administering adrenaline should accompany the team. If another school feels that they are not equipped to cater for any food-allergic child, alternative provision will be arranged.

Allergy Action Plans

Allergy action plans are designed to formally provide medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto injector.

LGST recommends using the British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans to ensure continuity. This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.

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

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)
- A photograph of each pupil to allow a visual check to be made

At LGJS and LGSS, the register is displayed in the staff room

At LGS the register is held within the pastoral bulletin.

Emergency Treatment and Management of Anaphylaxis

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

Staff are also trained in the administration of Adrenaline Auto-Injector's (AAIs) 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 device.

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.

Symptoms of anaphylaxis usually present very quickly after the person has come into contact with the allergen, such as food, insect or medicine, therefore immediate action is required.

Symptoms may include:

Airway:
• Swollen tongue
• Difficulty swallowing/speaking
• Throat tightness
• Change in voice (hoarse or croaky sounds)

Breathing:
• Difficult or noisy breathing
• Chest tightness
• Persistent cough
• Wheeze (whistling noise due to a narrowed airway)

Circulation:
• Feeling dizzy or faint
• Collapse
• Babies and young children may suddenly become floppy and pale
• Loss of consciousness (unresponsive)

Action to be taken:

- Position is important, lie the person flat with legs raised (or sit them up if having breathing problems)

- Give adrenaline WITHOUT DELAY. At LGJS and LGSS, the pupils' own device can either be found in their classroom or the First Aid room. For pupils at LGS, it can be found on their person or stored in the Medical Suite.
- Bring the AAI to the person having anaphylaxis, and not the other way round. Avoid standing or moving someone having anaphylaxis
- Call an ambulance (999) and tell the operator it is anaphylaxis
- Stay with the person until medical help arrives
- If symptoms do not improve within five minutes of a first dose of adrenaline, give a second dose using another AAI
- A person who has a serious allergic reaction and has been given adrenaline should always be taken to hospital for further observation and treatment
- Sometimes symptoms can recur after the first episode has been treated. This is called a biphasic reaction.

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
- 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)
- The symptoms present for the school nurse to strongly suspect the pupil is experiencing an anaphylactic reaction. The administration of adrenaline by injection (1:1000), Chlorpheniramine and Salbutamol are among those drugs listed under article 7 of the Prescription Only Medicines (human use) Order 1997 for the administration in an emergency for the purpose of saving life.
- Ambulance control directs the member of school staff to administer the AAI

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 (e.g. skin rash, itching or sneezing), the pupil will be assessed by the school nursing team and the appropriate treatment instigated.

Serious incidents and "near misses".

Any allergy-related incident will be managed in the first instance through the Emergency Treatment and Management of Anaphylaxis procedures outlined within this policy. All incidents will be recorded within the pupil's medical record and reported, where appropriate, in accordance with the Trust's Health and Safety and First Aid policies. Any serious incident, including significant allergic reactions, administration of an adrenaline auto-injector, or identified near miss, will be subject to a formal review led by the School Nurse, Catering Providers and relevant senior Trust leaders. The review will seek to identify lessons learned, any required improvements to practice, training or procedures, and the outcomes will be reported to the Health and Safety Committee of Trustees for oversight and assurance.

Near Misses and Incident Reporting

Any near miss involving an allergen exposure, failure of controls, medication availability issue, or other event that had the potential to result in an allergic reaction will be recorded and managed in accordance with the Trust's Health and Safety and First Aid policies. Near misses will be reviewed by the School Nursing Team and relevant staff to identify contributory factors and lessons learned. Where necessary, corrective actions will be implemented, communicated to relevant staff, and monitored to reduce the likelihood of recurrence and further strengthen allergy safety across the Trust.
Parents and students can contact the school nursing team at any point to report near miss information.

Adrenaline auto-injectors (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools (2017) the Trust has purchased numerous devices and made them readily available to everyone across the Trust site.

Purchasing of spare AAIs

The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance. This includes:

- Where the AAIs will be sourced
- The quantity of AAIs required
- Which brand(s) of AAI are purchased (schools are recommended to buy a single brand to avoid confusion)
- The dosage required (based on Resuscitation Council UK's age-based criteria)

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 have access at all times.
- Not locked away, but accessible and available for use at all times
- Not located more than 5 minutes away from where they may be needed
- Spare AAIs are kept separate from any pupil's own prescribed AAI and clearly labelled to avoid confusion.

Maintenance (of spare AAIs)

The School Nursing Team are responsible for checking monthly that:

- The AAIs are present and in date

- Replacement AAIs are obtained when the expiry date is near

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 contracted waste disposal firm).

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

The Trust provide staff with specially designed AAI kits to be taken off the school site for sporting fixtures and school trips.

Emergency anaphylaxis kits

Acknowledging the expanse of the three school sites, the Trust stock emergency anaphylaxis kits located at various locations. These kits facilitate the quick and easy retrieval of an AAI wherever a pupil maybe. The kits include:

- Spare AAIs of both 0.15mg and 0.3mg
- Instructions for the use of AAIs
- A record of when AAIs have been administered
- Antihistamine medication (for administration under either the School Nurse’s direction or ambulance control operator)