

ST. ANNE'S CATHOLIC HIGH SCHOOL FOR GIRLS



ALLERGY SAFETY POLICY

**Keeping Every Student Safe from
Allergic Reaction and Anaphylaxis**

Autumn 2026

Next Review: Autumn Term 2027

Resources & Personnel and One-Site & Premises Committee

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MISSION STATEMENT

St. Anne's Catholic High School for Girls will offer a positive presence in Enfield with a comprehensive curriculum equipping students with the ability to meet the challenges of the 21st Century confidently and with high spiritual and moral standards.

We recognise that students, parents, staff and governors make up the school's community which will continually self-evaluate to improve itself effectively and efficiently in all aspects of its growth.

'Act justly, love tenderly, walk humbly with your God.'

1. Purpose and Scope

This policy sets out how St Anne's Catholic High School for Girls ("the school") manages allergy safety across both the Palmers Green and Enfield campuses. It is a dedicated allergy safety policy, separate from the school's Medication in School Policy, as required by DfE statutory guidance issued under section 100 of the Children and Families Act 2014, given the specific risk to life posed by anaphylaxis.

This policy applies to all pupils, staff, volunteers, governors and visitors across both campuses, and to all school activities including lessons, lunch, extended school provision, school trips and off-site visits.

Allergy is understood broadly to include: food allergy; allergy to insect stings; asthma (which is usually allergic in nature, and which is addressed in detail in the school's companion Asthma Policy); eczema; hay fever (allergic rhinitis); and rarer conditions such as mast cell activation syndrome (MCAS) where anaphylaxis risk exists. Where a pupil's known allergy-related sensitivity does not meet formal clinical diagnosis criteria but poses a risk, the school will nonetheless treat this policy as applying.

2. Legal and Statutory Framework

This policy has been developed with regard to the following legislation and guidance:

- Section 100, Children and Families Act 2014 — duty to make arrangements to support pupils with medical conditions
- DfE Statutory Guidance: Supporting children and young people with medical conditions and allergy (March 2026)
- Equality Act 2010 — severe allergies may constitute a disability; the school must make reasonable adjustments
- Human Medicines (Amendment) Regulations 2017 — permitting schools to purchase "spare" adrenaline auto-injectors (AAIs) without prescription
- Human Medicines (Amendment) (No. 2) Regulations 2014 — permitting schools to hold an emergency asthma reliever inhaler
- Food Information Regulations 2014 and Natasha's Law 2021 — allergen labelling requirements
- Health and Safety at Work etc. Act 1974 — employer duty of care
- Keeping Children Safe in Education (current) — safeguarding responsibilities
- DHSC guidance: Using emergency adrenaline auto-injectors in schools
- MHRA guidance: Adrenaline auto-injectors (AAIs): guidance and resources for safe use

3. Roles and Responsibilities

The Governing Body

Ensures the school has arrangements in place to support pupils with allergies, that this policy is adopted and reviewed, and that sufficient resources (including spare AAIs) are made available.

The Headteacher

Has overall responsibility for the implementation of this policy and for ensuring staff are appropriately trained.

Allergy Lead (DJE, Assistant Headteacher — both campuses)

DJE, Assistant Headteacher, is the named Allergy Lead for St Anne's across both campuses, and holds day-to-day strategic responsibility for allergy safety: maintaining the Allergy Register, coordinating Individual Healthcare Plans (IHPs) and Allergy Action Plans where provided by the NHS. Coordinating the allergy action plan where there are no IHP or Allergy Action plan shared by NHS or families. Organising staff training, overseeing spare AAI provision, and reporting to governors.

Class Teachers and Support Staff

Are familiar with the pupils in their care who have allergies, know the location of relevant IHPs and Allergy Action Plans, the general action plan and follow the emergency response protocol in this policy.

Externally contracted Catering Staff

Maintain accurate allergen information for all food provided, follow Natasha's Law labelling requirements, and operate procedures to prevent cross-contamination in preparation and service.

Parents and Carers

Provide the school with full and current medical information, supply in-date medication and AAI's where prescribed, and inform the school promptly of any change in their child's condition or treatment.

4. The Allergy Register

The school maintains an Allergy Register for each campus via Arbor and the Medical Tracker system, recording every pupil with a diagnosed allergy, the nature of the allergy, and whether an AAI or other emergency medication is prescribed. The Register is reviewed at the start of each academic year and updated immediately whenever new information is received.

The Register is accessible via Arbor to relevant staff on a need-to-know basis, including class teachers, catering staff, cover supervisors, and staff supervising trips or extra-curricular activities.

5. Individual Healthcare Plans (IHPs) and Allergy Action Plans

Pupil with a diagnosed allergy that carries a risk of anaphylaxis should have an NHS Individual Healthcare Plan (IHP), which incorporates an Allergy Action Plan completed and signed by a healthcare professional and the pupil's parents/carers. The IHP records: the pupil's specific allergens; signs and symptoms of a reaction; current medication, dosage and storage location; and step-by-step emergency instructions.

IHPs are reviewed annually, or sooner following a reaction, a change in diagnosis, or a house/campus transfer. Copies where available are held securely on Arbor and the Medical Tracker. Where the IHP and /or Allergy action plan have not been shared with the school we have a planned procedure. Staff are aware of students with mild and severe allergies via Arbor, it also shows parental consent. Staff have been trained to recognise signs of allergic reactions and how to use AAI/ EpiPens where necessary.

6. Staff Training and Annual Drills

All staff receive annual allergy awareness training covering recognition of an allergic reaction and anaphylaxis, use of an AAI, and the school's emergency response protocol. A core group of staff on each campus receives more detailed practical training in AAI administration, refreshed annually.

Each campus conducts at least one anaphylaxis emergency drill per year, involving Reception, First Aid staff and SLT, to test response times and familiarity with procedures.

7. Allergen Exposure Minimisation

Food Provision

Catering teams display allergen information for all dishes in line with Natasha's Law, operate separate preparation areas and utensils for the 14 major allergens where practicable, and can provide alternative meals for pupils with allergies on request. Students will share food as part of social skills therefore students are informed through a gathering for each Year group of food allergies, we build their skills in asking before offering or accepting shared food and advocating for themselves and friends. Our aim is to build their skills concerning food safely and the ability to manage risks.

Curriculum and Extra-Curricular Activities

Subject areas that involve food or biological materials (for example food technology, science practicals) identify allergy risks in their risk assessments and adapt activities accordingly. Staff running clubs, trips and events check the Allergy Register in advance.

8. Adrenaline Auto-Injector (AAI) Storage and Spare Devices

Each pupil prescribed an AAI has their named device(s) stored in a clearly marked, unlocked location known to relevant staff — never in a locked cupboard or office that could delay emergency access. Pupils old enough and assessed as able to do so safely may carry their own AAI.

In line with the Human Medicines (Amendment) Regulations 2017, each campus holds a supply of two spare 300mcg adrenaline auto-injector devices, for use in an emergency on any pupil who is diagnosed with a serious allergy and prescribed an AAI, where their own device is unavailable or has failed, and where parental consent for use of a spare device is on file. Spare devices are stored at Reception on each campus, checked monthly for expiry, and replaced promptly once used or expired.

9. Emergency Anaphylaxis Response Protocol

Any member of staff who suspects a pupil is having an anaphylactic reaction will:

1. Call for help immediately — send another adult/pupil to alert Reception and First Aid staff, and to bring the pupil's AAI.
2. Lay the pupil flat with legs raised (or sitting if breathing is difficult); do not allow them to stand or walk.
3. Administer the AAI without delay if trained to do so, following the device instructions; a spare device may be used if consent is on file.
4. Call 999 immediately, stating "anaphylaxis", even if symptoms appear to improve.

5. Administer a second AAI dose after 5 minutes if there is no improvement and a second device is available.
6. Stay with the pupil until the ambulance arrives; do not leave them unattended.
7. Contact parents/carers as soon as possible and update the Medical Tracker record.

This protocol is displayed as a quick-reference guide in Reception, staff rooms and First Aid points on both campuses (see Appendix A).

10. School Trips and Off-Site Visits

Staff organising a trip check the Allergy Register for all pupils attending, ensure named and spare AAIs (with in-date status) travel with the group, and that at least one accompanying adult is confident in emergency response. Risk assessments for trips involving food (for example residential visits, cooking activities, or visits abroad) explicitly address allergen risk, and emergency contact and IHP information travels with the group.

11. Pupil Wellbeing and Inclusion

The school recognises that living with a serious allergy can affect a pupil's confidence and sense of belonging. Pastoral staff are alert to the wellbeing impact of allergy management — including anxiety about reactions, exclusion from food-based activities, or bullying related to a pupil's condition — and work with pupils and families to ensure full participation in school life wherever safely possible.

12. Incident Reporting

Every allergic reaction, whether mild or severe, and every use of an AAI (named or spare), is recorded on the Medical Tracker system on the day it occurs, including symptoms, action taken, and outcome. Any anaphylactic reaction, or any use of an AAI, is reported to the Allergy Lead and Headteacher, and to parents/carers, without delay, and is reviewed to identify any lessons for the pupil's IHP or wider practice.

13. Unacceptable Practice

It is not acceptable practice for the school to:

- Prevent a pupil from eating, drinking or taking part in activities because appropriate allergy support has not been arranged
- Send a pupil with a suspected allergic reaction home, or to Reception unaccompanied, instead of following the emergency protocol
- Require a parent/carer to attend school to administer medication that trained staff could otherwise give
- Prevent a pupil from carrying and administering their own AAI once assessed as able to do so safely
- Store a named or spare AAI in a locked location that would delay emergency access

14. Communication and Publication

This policy is published on the school website, referenced in the Staff Handbook and new-starter induction materials, and summarised for parents/carers in the school's

medical conditions correspondence. It is cross-referenced with the Medication in School Policy and the Asthma Policy so that staff and families see a single, consistent picture of how the school manages medical conditions across both campuses.

15. Annual Review

This policy is reviewed annually by the Allergy Lead and reported to governors, and sooner in response to a serious incident, a change in statutory guidance, or a significant change in the school's pupil population or premises.

Links with other policies

This policy links to the following policies:

- Medication in School Policy
- Asthma Policy
- Child Protection & Safeguarding Policy
- Health & Safety Policy
- SEND Policy
- First Aid Policy

Modification history

Version	Date	Description	Revision Author
1	September 2026	New Policy	Emmanuelle Danneau-Joyce

Quick-Reference — Anaphylaxis Emergency Response

For display in staff rooms and Reception on both campuses

SIGNS: Swelling of lips/face/throat; difficulty breathing or swallowing; widespread hives or flushed skin; abdominal pain, vomiting; dizziness, collapse, sense of “impending doom”.

ACT:

1. Send for help & the AAI
2. Lay flat, legs raised
3. Give AAI without delay
4. Call 999 — say ‘anaphylaxis’
5. Second dose after 5 mins if no improvement
6. Stay with the pupil
7. Log on Medical Tracker & contact parents
8. Inform Allergy Lead and Headteacher

Spare AAI (4 × 300mcg per campus) are held at Reception. Named AAI are stored, unlocked, at the pupil's campus as set out in each IHP.