



Nut -Awareness Policy 2025 26

This **Nut Awareness policy** outlines the practices, procedures, and responsibilities that Pencoys adopts to manage allergies effectively and reduce the risk of allergic reactions, including anaphylaxis, especially in relation to nuts and nut-containing products. This framework is compliant with current legislation and draws upon evidence-based guidance from the **Department for Education (DfE)**, **Ofsted**, and **NHS guidelines**.

1. Introduction

1.1 Purpose of the Policy

- To provide a safe school environment for all pupils and staff with allergies.
- To minimise the risk of exposure to allergens, specifically nut-related allergens.
- To promote awareness, understanding, and preparedness amongst staff, pupils, and parents.
- To meet legal duties under the *Children and Families Act 2014*, *Equality Act 2010*, *Health and Safety at Work Act 1974*, and *Supporting pupils at school with medical conditions (DfE, 2015)*.

1.2 Scope

- Applies to all pupils, staff, visitors, volunteers and contractors on site.
- Covers all areas of school life – classroom learning, lunch and snack times, school trips, extracurricular activities, and after-school provision.

1.3 Definitions

- **Allergy:** An overreaction of the immune system to a normally harmless substance.
- **Anaphylaxis:** A severe, potentially life-threatening allergic reaction.
- **Nut-Free/Allergen-Aware:** The school is not completely nut-free, but will maintain awareness and control measures to reduce risk.

2. Legal and Statutory Framework

2.1 Relevant Legislation

- *Children and Families Act 2014*
- *Equality Act 2010*
- *Health and Safety at Work Act 1974*
- *Human Medicines Regulations 2012*
- *Data Protection Act 2018 and UK GDPR requirements*

2.2 DfE Guidance

- DfE: *Supporting pupils with medical conditions at school (2015)*
- DfE: *Statutory framework for the early years foundation stage (EYFS)*
- DfE: *Keeping Children Safe in Education (KCSIE, 2023)*
- Ofsted: *School Inspection Handbook*

3. Roles and Responsibilities

3.1 School Leadership Team

- Ensure implementation of policy and monitoring of effectiveness.
- Ensure staff are appropriately trained.
- Maintain up-to-date records of pupils with allergies.

3.2 Governing Body

- Review policy annually and ensure statutory compliance.
- Hold leaders to account for ensuring safe management of allergies.

3.3 Staff

- Undertake allergy training and follow emergency procedures.
- Be familiar with medical information of pupils in their care.
- Prevent exposure to known allergens in classrooms or activities.

3.4 Parents and Carers

- Inform the school about their child's allergy and provide medical evidence.
- Provide updated medical documentation and emergency medication (e.g., adrenaline auto-injectors).

- Cooperate with the school on health care planning.

3.5 Pupils

- As appropriate by age and ability, understand their allergy and participate in individual healthcare planning.

4. Identification and Individual Healthcare Planning

4.1 Notification of Medical Conditions

- Upon admission, medical needs must be declared by parents/carers.
- School to request annual updates or as changes occur.

4.2 Individual Healthcare Plans (IHPs)

- All pupils with confirmed allergies to have a written IHP.
- Developed in consultation with parents, healthcare professionals, and the child where suitable.
- To include:
 - Allergen(s)
 - Symptoms of reaction
 - Medication required
 - Emergency procedures
 - Contact and healthcare permission details
- Reviewed at least annually or after any incident.

5. Nut Awareness Approach

5.1 Rationale

Due to the prevalence and severity of nut allergies, the school will adopt a **nut awareness** approach rather than declare the school a nut-free zone (as per the *Anaphylaxis Campaign* guidance and DfE best practice). This approach acknowledges that avoidance is difficult to guarantee but risk can be effectively reduced through robust precautions and education.

5.2 Practical Measures

- Request that no nuts or nut-containing products be sent into school in packed lunches or snacks.
- Prohibit the use of nuts in any school food preparation, DT or cooking lessons.
- Clear labelling for food on special occasions or bake sales.
- Nut-free alternatives promoted by caterers.

5.3 Supplier and Catering Considerations

- Ensure school meal provider is aware of nut allergy needs.
- Catering staff trained in allergen management as per *Food Standards Agency* requirements.
- Allergen information to be clearly displayed for all school meals.

6. Staff Training and Awareness

6.1 Medical and Emergency Training

- All staff to receive annual training on:
 - Signs and symptoms of allergic reactions and anaphylaxis.
 - Use of adrenaline auto-injectors (e.g., EpiPen or Jext).
 - Emergency protocols.
- Record of training attendance to be maintained centrally.

6.2 First Aid Provision

- Staff trained in paediatric first aid (EYFS) and general first aid familiar with allergy responsibilities.
- Adrenaline auto-injectors and emergency plans stored in accessible but secure locations.

6.3 Whole-School Awareness

- Age-appropriate lessons and assemblies to raise understanding and empathy.
- Include allergy education in PSHE curriculum (linked to *Relationships Education and Health Education* statutory guidance).

7. Emergency Procedures

7.1 Recognising an Allergic Reaction

Symptoms may include: hives, swelling, difficulty breathing, vomiting, drop in blood pressure, or loss of consciousness.

7.2 Response Protocol

- Call for an adult/first aider immediately.
- Administer adrenaline auto-injector without delay.
- Call 999 and say “anaphylactic shock”.
- Inform parents/carers immediately.
- Complete an incident report.

7.3 Use of Spare Auto-Injectors

- From 1 October 2017, schools are permitted to hold spare emergency AAI devices (*Human Medicines Regulations 2012* amendment).
- School to maintain a stock (opt-in basis) and parental consent gathered.

8. School Activities, Trips and Events

8.1 Inclusion and Planning

- Include allergy considerations in all risk assessments.
- Arrange specific medical provision for pupils on trips.
- Ensure staff supervising trips have full medical details and medication.
- Inform external providers (transport, catering) of allergy needs.

9. Record-Keeping and Review

9.1 Medical Records

- Maintain accurate and current information on pupils with allergies.
- Parents/carers responsible for updating changes.
- Medication expiry dates monitored.

9.2 Policy Review

- Review this policy annually.
- Review immediately if an incident occurs involving allergy or anaphylaxis.
- Consultation with health professionals and staff after any reactions.

10. Communication and Partnerships

10.1 Communication with Stakeholders

- Share the policy with all staff, parents and relevant external partners.
- Include summary information in newsletters or parent handbooks.
- Promote transparent communication between school and home.

10.2 Working with External Agencies

- Liaison with NHS nursing teams, allergy specialists, DfE and voluntary allergy support groups (e.g., *Anaphylaxis UK*, *Allergy UK*).
- Follow external medical advice for individual medical conditions.

11. Monitoring and Compliance

- Senior Leaders to conduct termly audits of IHPs, AAI device availability, and staff training.
- Incident logs monitored to identify patterns or areas for improvement.
- Governors and SLT to ensure proactive safeguarding against potential harm due to allergies.

Appendices

Appendix A: Sample Individual Healthcare Plan Template

Pupil's Name:

Date of Birth:

Class/Year Group:

Allergy/Condition:

Known Allergens:

Type of Reaction Expected (e.g., mild, moderate, severe):

Symptoms:

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Medication to be Administered:

- Auto-injector: YES / NO
- Antihistamine: YES / NO
- Other:

Location of Medication:

- Classroom staff
- First aid office
- Carried by pupil (if applicable)

Emergency Procedure:

- Step-by-step protocol if allergic reaction occurs
- Emergency contact numbers

Date Created:

Review Date:

Signed (Parent/Carer):

Signed (Staff responsible):

Appendix B: Allergen Risk Assessment Checklist

Area	Risk Factors Identified	Actions Taken to Mitigate Risk	Responsible Person
Classrooms	Food for projects, snacks brought in	Communication, signage, no sharing rules	Class teacher
Canteen	Cross-contamination, unclear labelling	Staff training, dedicated allergen stations	Head of Catering
School Trips	Unknown food, remote location	Medication carried, risk assessed, allergy info shared	Trip leader

Area	Risk Factors Identified	Actions Taken to Mitigate Risk	Responsible Person
Special Events	Bake sales, parties, treats	Allergen-free alternatives, labelled ingredients	Event organiser

Appendix C: Allergy Response Flowchart

Pupil showing symptoms



Call for trained first aider immediately



Administer AAI without hesitation



Call 999 and say "anaphylactic shock"



Stay with pupil, monitor breathing and consciousness



Contact parent/carer



Log and report incident, review IHP

Appendix D: Auto-Injector Administration Log

Date	Pupil Name	Staff Administering	Dose Given	Device Used	Ambulance Called (Yes/No)	Parent Informed	Notes/Follow-up

Last Reviewed: [Insert Date]

Next Review Due: [Insert Date]

Policy Owner: [Insert Name or Role]

Approved by Governing Body: [Insert Date]

References:

- Department for Education (2015). *Supporting pupils at school with medical conditions: statutory guidance*
- Department for Education (2023). *Keeping Children Safe in Education (KCSIE)*
- Equality Act 2010
- Health and Safety at Work Act 1974
- Food Standards Agency: *Allergens and food labelling*
- Anaphylaxis UK: *Guidance for Schools*