Date of last review:	September 2026	**Review period:**	Annual
Date of next review:	September 2027	**Owner:**	Operations Manager

School Allergy Policy

Empowering People – Shaping the Future

History of Policy Changes

Date	Section	Change	Origin of Change
Sept 2026		New policy for September 2026	
Oct 2026		Typographical changes, insertion of section related to staff and visitors and reference to governance arrangements	Feedback

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1 Policy Aims and Objectives

The aim of this policy is to provide a safe and inclusive environment for all students, staff and visitors with allergies. The school recognises that allergies can have a significant impact on an individual's health and wellbeing and that severe allergic reactions (anaphylaxis) can be life-threatening.

This policy outlines the school's responsibilities for identifying, managing and responding to allergic conditions while promoting inclusion and reducing unnecessary risks.

The policy will include:

- How the school manages allergies, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- How the school supports students with allergies to ensure their wellbeing and inclusion
- How the school promotes and maintains allergy awareness among the school community

The objectives of this policy are to:

- Identify students with allergies as early as possible
- Reduce exposure to known allergens where reasonably practicable
- Ensure staff understand allergy management
- Respond effectively in an emergency
- Support students to participate fully in school life
- Work closely with parents, carers and healthcare professionals

2 Legislation and Guidance

This policy is based on the Department for Education (DfE)'s guidance on allergies in schools and supporting students with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

The Food Information Regulations 2014

The Food Information (Amendment) (England) Regulations 2019

3 Roles and Responsibilities

The School takes a whole-school approach to allergy awareness.

3.1 Allergy Lead

The SLT nominated Allergy Lead is Rachel Reeves, Operations Manager

They are responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant students is delegated to Carmen Winter, Student Services first aider and overseen & audited by Rachel Reeves.
- **Ensuring:**

- All allergy information is up to date and readily available to relevant members of staff
- All students with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy training
- All staff are aware of the school's policy and procedures regarding allergies
- 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

3.2 Student Services

The Student Services first aider is responsible for:

- Co-ordinating the paperwork and information from families
- Information will initially be obtained from parents/carers by a Google Form and then followed up by a Teams Call with Student Services Medical staff
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the Allergy Lead
- Will maintain and keep up to date the Schools Allergy register
- The Allergy register will be kept electronically on W Drive/Medical Information/Allergy Register

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among students
- Maintaining awareness of our allergy policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Being aware of specific students with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of students with allergies

3.4 Governance

The Safeguarding governor is responsible for working with the allergy lead to monitor:

- arrangements in place to reduce the risk of individuals coming into contact with allergens, and
- the emergency response plan for cases of anaphylaxis

3.5 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.6 Students with allergies

These students are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.7 Students without allergies

These students are responsible for:

- Being aware of allergens and the risk they pose to their peers

Older students might also be expected to support their peers and staff in the case of an emergency.

4 Assessing Risk and Individual Healthcare Plans

An Individual Healthcare Plan will be produced for every student with a diagnosed allergy where there is a risk of an allergic reaction, particularly where there is a risk of anaphylaxis. The plan should be developed in partnership with the student (where appropriate), parents or carers, healthcare professionals and relevant school staff.

The individual Healthcare Plan should include:

- Photo of the student
- Known allergens
- Signs and symptoms
- Specific medical information to the student's allergy
- Medication prescribed
- Emergency procedures
- Emergency contacts
- How the allergy is managed on a daily basis
- Responsibilities of Parents/Carers, Teachers, First Aiders etc
- How the staff are going to be made aware of the allergy/ emergency procedures
- Consent from the parent for the school to administer medication

Individual Health care plans should be reviewed annually or as and when allergic reactions occur.

The School will also need to consider the risks for the students taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school educational visits
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any student at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

5 Preventing Exposure to Allergens and Minimising Risk

5.1 Hygiene procedures

- Students are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Purchasing of food for other students is not permitted
- Students have their own identifiable water bottles

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of students with allergies.

Catering staff receive appropriate training and are able to identify students with allergies.

School menus are available for parents/carers to view with ingredients clearly labelled.

Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of students.

Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing students and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA).

Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage students and staff to avoid certain high-risk foods to reduce the chances of someone 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 student 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.

5.4 Insect bites/stings

When outdoors:

- Shoes should always be worn

- Food and drink should be covered

5.5 Animals

All students will always wash hands after interacting with animals to avoid putting students with allergies at risk through later contact.

Students with animal allergies will not interact with animals.

5.6 Support for mental health

Students with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy.

Students with allergies will have additional support through:

- Pastoral check in with Student Services as required
- Support from tutor and Head of Year in line with Behaviour and Anti Bullying Policy
- Open access to mentoring and counselling as required

5.7 Events and school trips

For events, including ones that take place outside of the school, and school trips, no students with allergies will be excluded from taking part.

The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of students' allergies and to have received adequate training.

Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips

6 Staff, Volunteer and Visitor Allergies

The school recognises that allergies may affect staff, volunteers, contractors, governors, and visitors as well as students. The school is committed to providing a safe working and visiting environment and will take reasonable steps to reduce the risk of allergic reactions whilst balancing the needs of the whole school community.

6.1 Notification of Allergies

- Staff members are encouraged to inform the HR Lead of any diagnosed allergy that may require emergency treatment or workplace adjustments
- Supply staff, volunteers, contractors and regular visitors should notify the school of any significant allergies before attending school where practicable
- Information regarding severe allergies will be recorded confidentially and shared only with relevant personnel on a need-to-know basis in accordance with data protection requirements

6.2 Individual Risk Assessments

- Where a staff member has a severe allergy, the school will undertake an individual risk assessment to identify potential triggers and appropriate control measures.
- Reasonable adjustments may be considered where necessary to support staff with allergies and to reduce identified risks.
- The school will review risk assessments regularly and following any allergic incident

6.3 Emergency Medication

- Staff with prescribed allergy medication, including adrenaline auto-injectors (AAIs), are responsible for ensuring their medication is in date and readily accessible.
- Where agreed, the location of emergency medication will be known to designated first aid staff.
- Staff should ensure relevant colleagues are aware of their emergency procedures where appropriate in case of reaction in school.

6.4 Visitors and Contractors

- Visitors and contractors are responsible for carrying any prescribed emergency medication and informing the school of any significant allergy-related risks that may affect their safety whilst on site.
- The school cannot guarantee an allergen-free environment but will provide information regarding known allergy controls where relevant.
- When catering is supplied by the school, visitors will be asked in advance of any food allergies or intolerances. This information will be passed onto the Catering Manager.

7 Procedures for handling an allergic reaction

7.1 Register of students with AAIs

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

- Known allergens and risk factors for anaphylaxis
- Whether a student has been prescribed AAI(s) (and if so, what type and dose)
- Where a student has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the student
- A photograph of each student to allow a visual check to be made (this will require parental consent)

The register is kept electronically on W Drive/Medical/Allergy Register, there is also a paper copy in the medical folder in Student Services, these can be checked quickly by any member of staff as part of initiating an emergency response.

All students are permitted and we request they keep their AAIs with them so this will reduce delays and allows for confirmation of consent without the need to check the register.

7.2 Allergic reaction procedures

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

Staff are trained in the administration of AAIs to minimise delays in student's receiving adrenaline in an emergency

If a student has an allergic reaction, the staff member will initiate the school's emergency response plan, following the student's allergy action plan

Mild-moderate symptoms are usually responsive to an antihistamine. The student does not normally need to be sent home from school, or require urgent medical attention. However, mild reactions can develop into anaphylaxis: children having a mild-moderate (non-anaphylactic) reaction should therefore be monitored for any progression in symptoms and follow the emergency procedures if reaction develops into anaphylaxis:

- If an AAI needs to be administered, a member of staff will use the student's own AAI, or if it is not available, a school 'spare' device.
- If the student has no allergy action plan, staff will follow the school's procedures on responding to allergy.
- If an AAI needs to be administered, a member of staff will use the student's own AAI, or if it is not available, a school one

Follow the school's normal emergency procedures:

Always give an adrenaline auto-injector if there are ANY signs of anaphylaxis present.

You should administer the student's or staff own AAI if available, if not use the spare AAI. The AAI can be administered through clothes and should be injected into the upper outer thigh.

IF IN DOUBT, GIVE ADRENALINE

After giving adrenaline do NOT move the patient. Standing someone up with anaphylaxis can trigger cardiac arrest.

Provide reassurance.

The person should lie down with their legs raised.

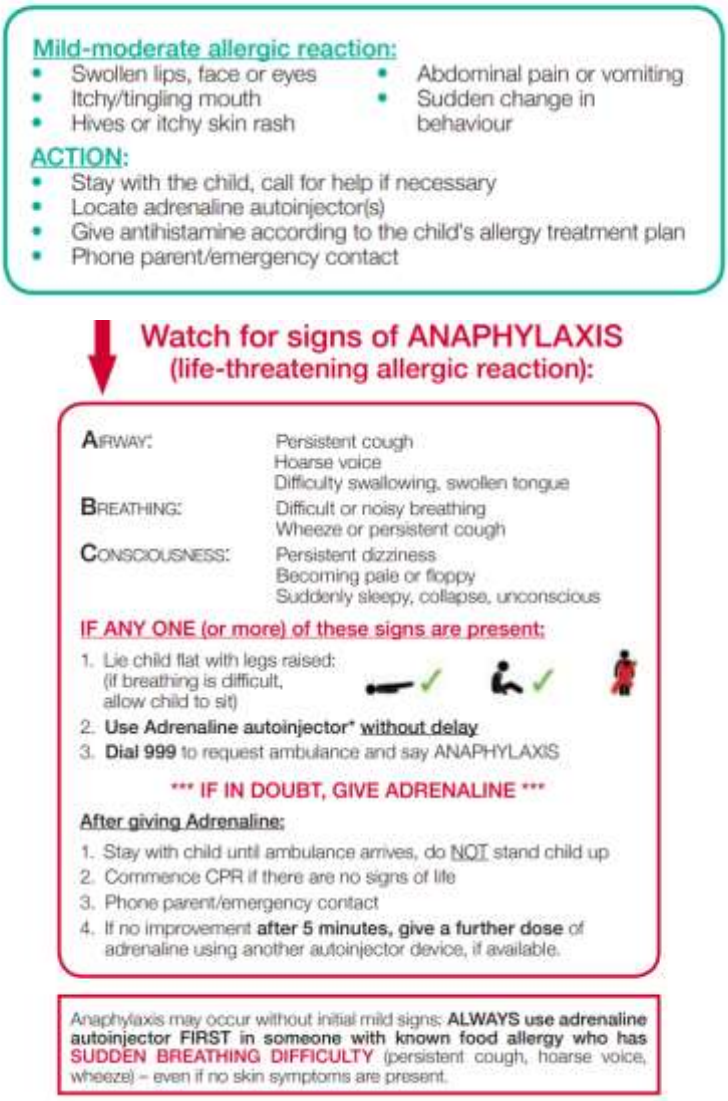
If breathing is difficult, allow them to sit.

If someone appears to be having a severe allergic reaction, it is vital to call the emergency services without delay – even if they have already self-administered their own adrenaline injection and this has made them better.

A person receiving an adrenaline injection should always be taken to hospital for monitoring afterwards.

- ALWAYS DIAL 999 AND REQUEST AN AMBULANCE IF AN AAI IS USED
- When calling 999 (or 112 from a mobile phone), state the person is suffering from anaphylaxis.
- Give clear and precise directions to the emergency operator; school postcode: SP6 3HN.
- If the person's condition does not improve 5 to 10 minutes after the initial injection you should administer a second dose. If this is done, make a second call to the emergency services to confirm that an ambulance has been dispatched.
- Send someone outside to direct the ambulance paramedics when they arrive. Tell the paramedics what may have caused this reaction if known, hand them the AAI with the time it was administered.
- Arrange to phone parents/carer
- Record the incident; time of reaction, where the reaction took place (classroom, PE lesson, restaurant, field etc) how much adrenaline was given and by whom. Time 999 called, time ambulance arrived, time person was taken to hospital.

The signs of an allergic reaction are:



A school AAI device will be used instead of the student's own AAI device if:

- Medical authorisation and written parental consent have been provided, or
- The student's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)
- If a student needs to be taken to hospital, staff will accompany the student to hospital by ambulance and stay with the student until the parent/carer arrives
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the student will be monitored at school and the parents/carers informed. The student will remain in school and return to lessons if well enough, if not, parents/carers will be asked to collect the student.

8 Adrenaline auto-injectors (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, set out your school's procedures for AAIs, covering these areas:

7.1 Purchasing of spare AAIs

The Allergy Lead is responsible for buying AAIs and ensuring they are stored according to the guidance. The Allergy Lead will have a signed letter from the Headteacher requesting the purchase of AAIs for the School.

- The AAIs will be sourced from Pharmacy online
- The quantity of AAIs required is 4
- The brand is Epi-Pen
- The dosage is 0.3 milligrams - based on Resuscitation Council UK's age-based criteria, for teenagers aged 12+

8.2 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, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times
- They are located no more than 5 minutes away from anywhere in the building
- Spare AAIs will be kept separate from any student's own prescribed named AAI, and clearly labelled to avoid confusion.

8.3 Maintenance (of spare AAIs)

Rachel Reeves and Carmen Winter are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near.

8.4 Disposal

AAIs can only be used once. Once a AAI has been used, it will be kept and given to the Emnergency Services who attend the student. If school need to dispose of the AAI, it will be disposed in line with the manufacturer's instructions.

8.5 Use of AAIs off school premises

Students at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on educational visits and off-site activities and events

8.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of students to whom the AAI can be administered
- A record of when AAIs have been administered

9 Training

The school is committed to training all staff in allergy response. This training will be provided to staff via in person annual training session at the start of each academic year by Winterbury Training.

The training will include:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions, including anaphylaxis
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies

10 Reporting of Anaphylaxis Events

In the event of an anaphylaxis event occurring the school will follow the normal reporting procedures of logging a medical event on Every Compliance.

This includes:

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a child, young person, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **near miss** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so, for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

Every Compliance will notify the Head of Estates, the Estates Advisor, the Headteacher and Director of Safeguarding allowing for a quick investigation to be commenced. Investigation templates are available to schools on Every Compliance to support with investigating the near miss or serious incident.

11 Links to other Policies

- This policy links to the following policies and procedures:
- Health and safety policy
- Supporting students at School with medical conditions policy
- School food policy