

Allergy Safety Policy

Harrow Way Community School



ALLERGY SAFETY POLICY

This policy, like all school policies, is to be implemented in accordance with the principles and practice stated in our Single Equality Scheme.

Harrow Way Community School Allergy Safety Policy

1. Policy Statement

At Harrow way Community School, we are committed to providing a safe, inclusive, and supportive environment for all pupils, staff, visitors, and members of the wider school community who have allergies. We recognise that allergies can have a significant impact on health, wellbeing, attendance, and participation in education.

This policy sets out the measures the school will take to minimise the risk of exposure to allergens, ensure effective emergency responses, and support the physical and emotional wellbeing of individuals with allergies. The school will have regard to the Department for Education's statutory guidance, *Allergy safety in schools*, when implementing this policy.

This policy complies with the requirements of Section 34 of the Children's Wellbeing and Schools Act 2026 and should be read and used alongside the school's

- Supporting Pupils with Medical Conditions Policy,
- First Aid Policy,
- Health and Safety Policy,
- Educational Visits Policy,
- Safeguarding Policy, Behaviour and Anti-Bullying Policies, and
- Data Protection Policy.

2. Roles and responsibilities

Headteacher

The headteacher has overall responsibility for implementing this policy and ensuring that appropriate systems are in place to safeguard pupils with allergies.

Named senior leader for allergy safety

The designated Allergy Safety Lead is:

Name: Tracey Roberts

Role: School Business Manager – responsible for Health & Safety and First Aider

The Allergy Safety Lead will:



- Oversee the implementation of this policy.
- Maintain oversight of allergy records and Individual Healthcare Plans (IHPs).
- Ensure staff training is completed and recorded.
- Monitor allergy-related incidents and near misses.
- Lead annual reviews of the policy.
- Liaise with parents, healthcare professionals, and external agencies where required.
- Ensure that risks relating to pupils with allergy are included on the setting's relevant risk registers and that arrangements for prescribed and spare adrenaline devices are reviewed regularly and that devices can be accessed within five minutes wherever they may be required.

Staff

All staff are responsible for:

- Following this policy and associated procedures.
- Completing allergy awareness and emergency response training on induction and at least annually thereafter.
- Familiarising themselves with pupils' allergy needs and care plans where relevant.
- Responding appropriately in an emergency.
- Reporting allergy incidents and near misses.

Parents and carers

Parents and carers are responsible for:

- Informing the school of any diagnosed allergy.
- Providing up-to-date medical information and ensuring that prescribed medication, including adrenaline devices where prescribed, is provided to the school, clearly labelled and in date.
- Supplying Allergy and /or Asthma Action Plans where applicable.
- Ensuring prescribed medication remains in date.
- Informing the school of any changes in medical circumstances.

Pupils

Where age and understanding permit, pupils are encouraged to:

- Take an active role in managing their allergies.
- Inform staff if they feel unwell or believe they have been exposed to an allergen.
- Carry prescribed medication where agreed and appropriate.
- Avoid sharing food.



3. Definitions

Allergy is a medical condition in which the body's immune system has an abnormal reaction to normally harmless substances such as food, insect stings, contact allergens and airborne allergens.

Anaphylaxis is a potentially fatal reaction affecting the Airway/Breathing/Circulation ("ABC"). Many individuals with allergies to food or insect stings are at risk of anaphylaxis.

Asthma is a lung disease caused by inflammation and tightening of the airways, it is frequently associated with allergy and anaphylaxis, because exposure to allergens can provoke an asthma attack, a potentially life-threatening condition.

Intolerance to foods or ingredients that the body is unable to digest is different to allergy and does not cause a serious allergic reaction. It can cause long term health problems if not avoided. Common food intolerances include lactose and gluten. Coeliac disease is a lifelong autoimmune condition to gluten, found in rye, barley and wheat.

Adrenaline device (AD): a device containing adrenaline for emergency treatment of anaphylaxis. This includes adrenaline auto-injectors (AAIs) and other licensed adrenaline devices.

4. Creating an allergy-aware culture

Allergy awareness training

All school staff present during times when pupils are on site will receive annual allergy awareness and emergency response training.

This includes, but is not limited to:

- teaching staff
- teaching assistants
- administrative staff
- catering staff
- site/facilities managers
- breakfast and after-school club staff
- agency and supply staff
- regular volunteers
- peripatetic staff.

Harrow Way Community School staff will have their training provided by the school; staff employed by wider organisations will have their training provided by their employer.

Annual allergy awareness and emergency response training will be delivered by a suitably qualified provider such as approved online training providers, or other competent healthcare professionals. Practical training in the use of adrenaline devices, including the school's spare devices where appropriate, will form part of annual refresher training. Appropriate trainer devices will be used for practical training.

The Allergy Safety Lead will ensure that annual training has been completed for all staff not employed directly by the school who work regularly with pupils.

New staff will receive allergy awareness and emergency response training as part of their induction, in line with other safeguarding training requirements.

Supply staff and temporary workers will be provided with information regarding pupils with severe allergies and emergency procedures before commencing duties.

Staff will also be informed where allergy information, Individual Healthcare Plans (IHPs), Allergy Action Plans, Asthma Action Plans and emergency procedures are stored and how these can be accessed quickly during normal school activities and emergency situations.

Annual training will cover, and ensure staff understand:

- What allergies are and the risks they present.
- The relationship between food allergy, asthma, eczema, hay fever, and other allergic conditions.
- The difference between food allergy, food intolerance, and coeliac disease.
- Known allergens within the school environment and where information on allergy triggers can be found.
- Symptoms of allergic reactions.
- The signs and symptoms of anaphylaxis.
- How to respond in an emergency:
 - How to contact emergency services and inform parents.
 - How to locate and administer adrenaline auto-injectors (ADs/AAls).
 - How to locate and administer emergency asthma medication where required.
 - How to access Allergy Action Plans and Individual Healthcare Plans.
- Their role in reducing allergen exposure.
- Procedures for reporting incidents and near misses.

Training records will be maintained by the Allergy Safety Lead.



5. Supporting wellbeing

The school recognises that living with allergies can contribute to anxiety and emotional distress.

Harrow way Community School will:

- Foster an inclusive and supportive environment.
- Promote pupil confidence and independence in managing allergies.
- Support pupils who are able to self-manage their allergy with supervision as appropriate.
- Ensure pupils with allergies can participate fully in school life.
- Provide appropriate pastoral support where needed.
- Work closely with parents and carers to address concerns.
- Promote understanding of allergies through age-appropriate education.

Bullying and Discrimination

Bullying, teasing, intimidation, or exclusion relating to a pupil's allergy or medical condition will not be tolerated.

Any incidents will be managed in accordance with the school's Behaviour and Anti-Bullying Policies.

6. Minimising risk

Harrow way Community School will take reasonable measures to reduce the likelihood of exposure to known allergens.

Measures include:

- Maintaining accurate allergy records.
- Informing relevant staff of allergy risks.
- Considering allergy risks during lesson planning and special events.
- Promoting good hygiene practices, including handwashing.
- Cleaning eating areas appropriately, and in line with guidance.
- Conducting individual risk assessments where necessary.

Curriculum activities

Staff planning activities involving food, animals, science experiments, art materials, cooking ingredients or other potential allergens will consider allergy risks beforehand, for example the use of cereal packets in junk modelling.



Suitable alternatives and reasonable adjustments will be provided where appropriate to ensure pupils are not excluded.

Airborne and Contact Allergens

Harrow way Community School recognises that not all allergies are food related. Where a pupil has a known allergy to airborne, contact or environmental allergens, such as pollen, animal dander, dust mites, latex, fragrances, chemicals or other environmental allergens, the school will implement reasonable measures to minimise exposure.

These measures will consider:

- Adjustments to classroom seating arrangements.
- Restrictions on the use of specific products or materials.
- Enhanced cleaning arrangements.
- Consideration of allergens during curriculum activities.
- Additional supervision or risk management measures where necessary.

Any specific arrangements required will be recorded within the pupil's Individual Healthcare Plan and supported by individual risk assessments where appropriate.

7. Food allergy management

The school will work closely with catering providers, and families to manage food allergy risks.

Harrow Way Community School will:

- Require catering providers to provide accurate, current allergen information for all food provided.
- Ensure allergen information is readily accessible to pupils, parents/carers and relevant staff.
- Ensure that allergen information is checked whenever menus, ingredients or food products are changed or substituted.
- Ensure that the school and its catering provider have effective arrangements to identify and manage the 14 regulated allergens.
- Encourage pupils not to share food or drinks.
- Communicate clearly regarding food-related school events.
- Assess risks associated with food brought into school and take proportionate measures to minimise the risk of allergen exposure.
- Employ at least two methods of identifying pupils with a known allergy at mealtimes, for example photographs displayed in staff-only areas and adult verification procedures.



School leaders will undertake suitable risk assessments and management arrangements for food brought onto the premises by pupils, staff, visitors and parents. Particular consideration will be given to celebrations, fundraising events, food technology lessons, cultural events, educational visits and any activity involving the preparation or sharing of food.

The school cannot guarantee an allergen-free environment but will take reasonable steps to minimise risk.

8. Identification and record keeping

Harrow Way Community School will maintain an up-to-date register of pupils with known allergies and, where voluntarily disclosed and necessary to support health and safety arrangements, records of staff and regular visitors with severe allergies.

Information regarding allergies will be collected:

- During admission processes
- Through annual medical information updates issued to all parents at the start of each academic year.
- Through Individual Healthcare Plan reviews.

Following notification from parents or healthcare professionals of any change in a pupil's medical condition.

Records will include:

- Pupils with allergies and the severity of reactions.
- Their known allergens.
- Prescribed medications and the location of their medication.
- Individual Healthcare Plans.
- Allergy Action Plans.
- Asthma Action Plans where relevant.
- Emergency contacts.
- Details of whether the pupil has prescribed adrenaline devices and, where appropriate, the location of those devices.

Information will be obtained from:

- Parents and carers.
- Healthcare professionals.
- Previous educational settings.
- Admission documentation.



All records will be reviewed at least annually by the Allergy Safety Lead and updated whenever circumstances change. The allergy register, associated Allergy Action Plans, Asthma Action Plans and Individual Healthcare Plans will be formally reviewed with parents and carers at least annually and whenever there is a significant change in medical advice, diagnosis or treatment.

9. Individual Healthcare Plans (IHPs)

An Individual Healthcare Plan will be developed for pupils where:

- Their allergy has a functional impact within the school environment.
- They are at risk of harm because of their allergy and they require arrangements that are additional to or different from those provided generally.

IHPs will set out:

- The pupil's allergy and known triggers.
- Symptoms requiring action.
- Preventative measures.
- Medication arrangements, including storage, access and arrangements for ensuring medication is available during all relevant school activities.
- Any reasonable adjustments required.
- Emergency procedures.
- Staff responsibilities.
- Educational visits arrangements.
- How the pupil's wellbeing will be supported, including how they will be supported to participate fully in school life.

Where provided, Allergy Action Plans and Asthma Action Plans will be attached to or referenced within the IHP.

Plans will be reviewed at least annually and following any significant reaction, or following changes to treatment or diagnosis.

10. Prescribed Adrenaline Devices (ADs) or Auto-Injectors (AIs)

Pupils prescribed adrenaline devices (ADs), including adrenaline auto-injectors (AIs), must have access to their prescribed medication at all times. The school will ensure that pupils at risk of anaphylaxis are never more than five minutes from access to their prescribed adrenaline devices during the school day, on educational visits and during extracurricular activities.

Pupils who are able to carry their own prescribed adrenaline devices safely should be encouraged to do so. Where a pupil cannot safely carry their own devices, appropriate arrangements will be made for the devices to be stored in an accessible location, known to relevant staff and available at all times.

Pupils prescribed adrenaline devices should have access to two devices, in accordance with their individual medical advice.

This includes enabling rapid access:

- In classrooms.



- During break and lunch periods.
- On sports fields.
- During educational visits.
- During extracurricular activities.

Medication storage locations will be known to all relevant staff and clearly identified.

The school will maintain records of:

- Pupils prescribed ADs/AAls.
- The location of devices.
- Expiry dates.
- Relevant Action Plans.

Parents remain responsible for ensuring prescribed devices are supplied and replaced before expiry. Parents are encouraged to sign up for expiry date reminders on the device manufacturer website.

Where pupils routinely take prescribed ADs/AAls between home and school, parents and carers remain responsible for ensuring the devices accompany the pupil each day and remain in date. Pupils are encouraged to keep their devices in their school bag, ensuring they have access to them when travelling to or from school.

The school will undertake termly checks of recorded expiry dates and notify parents and carers when replacement medication is required.

11. Spare Adrenaline Auto-Injectors

The school will order ADs/AAls and emergency asthma inhalers from a registered pharmaceutical supplier.

Harrow Way Community School will maintain appropriately dosed spare adrenaline devices for emergency use, in accordance with the Department for Education statutory guidance.

Storage

Spare ADs/AAls will:

- Be clearly labelled as emergency stock, with their strengths easily visible
- Be stored in pairs.
- Be easily accessible.
- Never be locked away.
- Be stored at room temperature, away from extremes of heat and direct sunlight.



- Be located so that emergency medication can reach a pupil within five minutes of it being required.

The school will organise the storage of prescribed and spare adrenaline devices so that no pupil at risk of anaphylaxis is more than five minutes from access to adrenaline at any point during the school day. Where required, additional emergency kits will be located in strategic areas of the school site to support this requirement.

Spare adrenaline devices will be stored in clearly identified, readily accessible locations. The school will determine the number and location of emergency kits according to the size and layout of the site, ensuring that a spare device can be brought to a person experiencing anaphylaxis within five minutes.

Monitoring

The school will maintain a listed record of all devices and their location, and

- Check expiry dates at least termly and ensure devices are replaced promptly following use or before expiry.
- Dispose of used devices safely in accordance with medical waste requirements.

Spare emergency kits may/will include:

- Spare AAls.
- Emergency asthma reliever inhaler.
- Spacers to support inhaler intake.
- Instructions for use.
- Emergency contacts.

‘Spare’ Asthma Inhalers

- Emergency asthma inhalers will only be given to pupils who have been prescribed an inhaler when their own inhaler is not available and where written parental and carer consent has been obtained to do so.

12. Educational visits and off-site activities

Pupils with allergies will be fully included in educational visits.

Risk assessments will be undertaken ahead of a planned trip and include consideration of:

- Itinerary and venue risks.
- Known allergens.
- Food arrangements.
- Access to emergency medication.



- Staff trained in emergency response.
- Emergency medical services available at the destination.
- Availability of a mobile phone signal.
- Contingency arrangements in the event of allergen exposure.

All staff and supporting adults on the trip will be briefed about the known allergen risks of pupils.

Pupils at risk of anaphylaxis will have access to their prescribed AD/AAI throughout the visit, by holding it themselves or it being held by a designated member of staff, in accordance with the pupil's IHP and the visit risk assessment.

13. Responding to allergic reactions

In the event of an allergic reaction:

1. A member of staff will remain with the pupil and assess the situation immediately.
2. If anaphylaxis is suspected, adrenaline must be administered immediately using the pupil's prescribed adrenaline device where available, or an appropriate spare adrenaline device where permitted and clinically indicated. Staff must not wait for confirmation of the diagnosis or for emergency services to arrive before administering adrenaline.
3. Call 999 immediately and state that the pupil is experiencing anaphylaxis.
4. Follow the pupil's Allergy Action Plan or IHP where available.
5. If symptoms do not improve, or return, a second adrenaline device should be administered after 5 minutes where available and in accordance with the pupil's emergency plan.
6. The pupil must remain under appropriate supervision until emergency medical services take responsibility for their care.
7. Parents or carers will be informed as soon as possible.
8. The incident will be recorded, reviewed and appropriate follow-up action taken.

Where there is any doubt, staff will treat a suspected anaphylactic reaction as a medical emergency, including where a pupil with no known allergy presents with symptoms consistent with anaphylaxis.

- Staff will immediately call 999.
- A trained member of staff may administer a spare AD/AAI where permitted and clinically indicated.
- Parents and carers will be informed immediately.
- The incident will be investigated and appropriate medical follow-up encouraged.

14. Reporting serious incidents and near misses



All allergy-related incidents and near misses will be reported on the same day and, wherever possible, within two hours of the incident.

The report will include:

- Date and time.
- Individuals involved.
- Circumstances of exposure.
- Actions taken.
- Outcomes.
- Lessons learned.
- Parents will be informed.
- Risk assessments and procedures will be updated as necessary.

The Allergy Safety Lead will review incidents to identify improvements and reduce future risks, at least on a termly basis. Trends arising from incidents and near misses will be analysed and reported to senior leaders and governors as appropriate.

Lessons learned will be used to inform future policy reviews, staff training, risk assessments and wider allergy safety arrangements across the school.

Parents and carers may also report allergy-related incidents or near misses which become apparent after the pupil has left school. Such reports will be recorded and reviewed in the same way as incidents occurring on school premises.

15. Information sharing and confidentiality

The school will manage allergy information in accordance with UK GDPR and Data Protection legislation.

Information will only be shared on a need-to-know basis to protect a pupil's health and safety.

Information will be shared with staff and supporting adults where necessary to enable them to keep a pupil safe, including during educational visits and extracurricular activities.

Relevant staff will have access to:

- Individual Healthcare Plans.
- Allergy Action Plans.
- Emergency procedures.

Information will be handled sensitively and respectfully at all times.

16. Raising awareness

**This policy will be:**

- Published on the school website.
- Available in hard copy on request.
- Included within staff induction processes.
- Referenced during annual allergy awareness training.
- Communicated to pupils, parents/carers and staff.

The school will promote age-appropriate allergy awareness amongst pupils and within its curriculum to help create a supportive and inclusive environment.

Where appropriate and agreed with parents and carers, peers may be taught how to seek help quickly if a pupil experiences an allergic reaction.

17. Monitoring and review

This policy will be reviewed annually by the Allergy Safety Lead and Governing Body, or sooner following:

- A serious allergic reaction.
- An anaphylaxis incident.
- A significant near miss.
- Changes in legislation or statutory guidance.
- Changes to school arrangements for the storage, supply or administration of adrenaline devices.

Committee Responsible for Review:	F&GP Committee
Ratified by Governing Body:	24/09/2026
Date of next Review due by:	September 2027

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Appendix 1 – Useful Resources and Guidance

[Supporting pupils with medical conditions at school - GOV.UK](#)

[Allergy Safety in Schools statutory guidance](#)

[Government Allergy Safety Policy template](#)

[Individual Healthcare Plan for allergy template \(Gov.UK\)](#)

[Template to order adrenaline auto-injectors from a pharmaceutical supplier](#)