



Thameside Primary School: Allergy Safety Policy

Approved by Governors: September 2026

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Policy written by:	Charlotte Harkins
Key Changes:	This is a new policy following publication of new guidance for schools in July and August 2026.

1. Aims and objectives

Thameside Primary School is committed to providing a safe, inclusive and supportive environment for every pupil, including pupils who have allergies or are at risk of anaphylaxis.

The school recognises that allergic reactions can be life-threatening and that appropriate prevention, preparation and emergency response are essential.

This policy sets out the arrangements the school has in place to:

- identify pupils, staff and regular visitors with allergies;
- identify known allergens and the potential severity of allergic reactions;
- minimise the risk of exposure to known allergens;
- ensure pupils with allergies can participate fully in school life;
- ensure appropriate Individual Healthcare Plans (IHPs) are developed and maintained;
- ensure prescribed adrenaline devices are readily accessible;
- maintain appropriate spare adrenaline devices for emergency use;
- ensure staff receive appropriate allergy awareness and emergency response training;
- manage food allergy safely;
- manage allergy risks during lessons, clubs, sporting activities, visits and trips;
- respond appropriately to allergic reactions and suspected anaphylaxis;
- record, report and learn from serious incidents and near misses;
- promote the wellbeing and inclusion of pupils with allergies; and
- ensure relevant allergy information is shared appropriately and lawfully.

This policy has been developed with regard to the Department for Education's statutory guidance **Allergy safety in schools** and the accompanying DfE allergy safety policy template.

2. Legal and statutory framework

This policy is made in accordance with the school's statutory responsibilities, including:

- Section 100 of the **Children and Families Act 2014**, concerning arrangements to support pupils with medical conditions;
- Section 34 of the **Children's Wellbeing and Schools Act 2026**, which introduces the statutory requirement for an allergy safety policy as part of Benedict's Law;
- the Department for Education's **Allergy safety in schools** statutory guidance;
- relevant requirements concerning food information and allergens;
- the Equality Act 2010, where allergy constitutes a disability;
- UK GDPR and the Data Protection Act 2018 concerning health information; and
- other relevant health and safety, safeguarding and first-aid requirements.

The governing body will have regard to the DfE statutory guidance when exercising its functions in relation to allergy safety.

The school will review this policy **at least annually** and sooner where an incident, near miss, change in circumstances, new clinical advice or change in legislation/guidance indicates that a review is necessary.

The DfE guidance specifically requires policies to be accessible to parents and staff and published on the school's website.

This policy should be read in conjunction with other school policies, including, but not limited to:

- Data protection policy
- Educational visits policy and guidelines
- Food policy
- Health and safety policy
- Safeguarding and child protection policy
- SEND and Inclusion policy
- Supporting pupils with Medical Conditions Policy
- Wraparound care policy

3. Roles and responsibilities

Governing body

The governing body will:

- ensure that an effective allergy safety policy is in place;
- approve the policy and review it at least annually;
- ensure the policy is implemented effectively;
- ensure appropriate resources and arrangements are available to manage allergy risks;
- monitor compliance with the policy;
- receive information about serious incidents and significant near misses;
- ensure lessons are learned from incidents;
- ensure appropriate staff training is provided; and
- ensure the policy is published and readily accessible.

A named governor will have oversight of allergy safety.

The named governor for Thameside Primary School is: Mr Guy Bickerton

Headteacher

The Headteacher has overall responsibility for ensuring that the school's allergy safety arrangements are implemented.

The Headteacher will:

- appoint a named senior leader responsible for allergy safety;
- ensure staff receive appropriate training;
- ensure suitable emergency arrangements are in place;
- ensure appropriate records are maintained;
- ensure parents/carers are appropriately informed;
- ensure allergy arrangements are incorporated into relevant risk assessments;
- ensure catering arrangements are safe;
- ensure pupils with allergies are appropriately supported and included; and
- report significant issues to the governing body.

Named Allergy Lead

The school will appoint a named senior leader to lead allergy safety.

The Allergy Lead will:

- oversee implementation of this policy;
- maintain oversight of the school's allergy register;
- coordinate IHPs and allergy action plans;
- ensure relevant staff know which pupils have allergies and what action is required;
- coordinate staff allergy awareness training;
- oversee the management and checking of spare adrenaline devices;
- coordinate incident and near-miss reporting;
- ensure allergy risk assessments are reviewed;
- liaise with parents/carers, healthcare professionals and the catering provider where appropriate;
- ensure allergy arrangements are considered for educational visits;
- monitor compliance and identify areas for improvement; and
- lead or contribute to the annual policy review.

The named allergy lead for Thameside Primary School is: Charlotte Harkins, AHT Inclusion

All staff

All staff who work with pupils are expected to:

- understand the school's allergy safety arrangements;
- attend required allergy awareness and emergency response training;
- know how to identify pupils with known allergies;
- know where relevant allergy and emergency information is held;
- take reasonable steps to prevent exposure to known allergens;
- follow pupils' IHPs and Allergy Action Plans;
- know how to summon emergency assistance;
- know the location of relevant emergency medication;
- respond promptly to suspected anaphylaxis;
- report incidents and near misses immediately; and
- maintain confidentiality when handling pupil health information.

This includes permanent, temporary, supply and agency staff, regular volunteers, catering staff and staff supervising breakfast or after-school clubs. The DfE policy template specifically identifies these groups as requiring allergy awareness training.

Parents/carers:

All parents and carers are required to:

- inform the school promptly of any diagnosed allergy;
- provide accurate information about the allergy;
- provide healthcare-professional Allergy Action Plans where available;
- provide prescribed medication where required;
- complete relevant information and forms when sent home by school within a timely manner;

- ensure prescribed medication is in date;
- replace medication before it expires;
- inform the school of changes to medication or treatment;
- inform the school of changes in the pupil's allergy;
- participate in IHP reviews; and
- provide information relevant to school trips and activities.

4. Allergy awareness training

The school will provide allergy awareness and emergency response training to all staff who are present when pupils are on site.

Training will be provided:

- as part of induction for new staff;
- at least annually;
- when significant changes are made to the school's allergy arrangements;
- following a serious incident or significant near miss where additional training is identified as necessary; and
- where an individual's role or responsibilities require additional training.

Training will cover:

- what an allergy is;
- common allergic conditions and triggers;
- food allergy, food intolerance and coeliac disease;
- how allergic reactions occur;
- common symptoms of an allergic reaction;
- recognition of anaphylaxis;
- how to reduce exposure to known allergens;
- the school's allergy safety policy;
- how to identify pupils with known allergies;
- how to use IHPs and Allergy Action Plans;
- the location of prescribed and spare emergency medication;
- emergency procedures;
- use of adrenaline auto-injectors or other approved adrenaline devices;
- when and how to call 999;
- informing parents/carers;
- recording and reporting incidents and near misses; and
- the potential impact of allergy on pupil wellbeing.

Training records will include the date, content, attendees and any competency requirements. The school will ensure appropriate arrangements are made for supply, temporary and cover staff.

5. Identifying pupils with allergies

The school will seek to identify pupils with allergies as early as possible.

Information may be obtained through:

- admission and enrolment information;
- parents/carers;
- previous schools or settings;
- healthcare professionals, where appropriate;
- pupil self-reporting, where appropriate; and
- information supplied during the school year.

Parents/carers are expected to inform the school promptly of:

- a new allergy diagnosis;
- a change to a known allergy;
- changes to prescribed medication;
- changes to an Allergy Action Plan;
- changes to the severity of the allergy; or
- any other information relevant to the pupil's safety.

The school will maintain an up-to-date allergy register containing appropriate information, including:

- pupil's name;
- class/year group;
- known allergen(s);
- nature/severity of the allergy where known;
- whether the pupil is at risk of anaphylaxis;
- whether an IHP is required;
- whether an Allergy Action Plan is in place;
- prescribed emergency medication;
- location of prescribed medication;
- relevant emergency instructions; and
- review dates.

Information will be updated whenever relevant circumstances change and checked as part of the school's routine medical information review.

6. Individual Healthcare Plans

A pupil will have an **Individual Healthcare Plan (IHP)** where their allergy:

- has a functional impact on them at school;
- places them at risk of harm; and
- requires arrangements that are additional to or different from those generally made by the school.

The IHP will set out the arrangements required to support the individual pupil, including emergency arrangements. Where appropriate, the IHP will refer to or include an Allergy Action Plan or other healthcare-professional plan.

IHPs will be developed with appropriate involvement from:

- the pupil, where appropriate;
- parents/carers;
- relevant school staff; and
- healthcare professionals where appropriate.

IHPs will be reviewed:

- at least annually;
- when the pupil's circumstances change;
- when new clinical advice is received;
- when medication changes; or
- following a significant incident or near miss.

The DfE policy identifies IHPs as appropriate where an allergy has a functional impact, creates a risk of harm and requires arrangements additional to or different from the school's general arrangements.

7. Prescribed adrenaline devices

Where a pupil has been prescribed an adrenaline device, the school will ensure that the device is accessible rapidly whenever the pupil is on school premises or participating in a school activity. This includes:

- classrooms;
- dining areas;
- playgrounds;
- the fields;
- PE activities;
- clubs;
- educational visits;
- trips; and
- other off-site activities.

The school will aim to ensure that prescribed adrenaline is available for administration **within five minutes**, in accordance with the DfE guidance.

Pupils should not be prevented from participating in activities because they require access to emergency medication.

The school will maintain appropriate records of prescribed adrenaline devices.

Parents/carers will be informed of arrangements for taking prescribed devices home, including where appropriate at the end of the school day, and will be responsible for ensuring replacement devices are obtained before existing devices expire. This will be in line with other medications in school, as detailed in the Medical Conditions policy.

The school will check relevant expiry dates and remind parents/carers where replacement medication is required. This is completed at least three times a year at the end of each 'big' term.

8. Spare adrenaline devices

The school will maintain spare adrenaline devices for emergency use in accordance with the DfE statutory guidance. Spare devices will:

- be stored in clearly identified locations;
- be readily accessible and **not locked away**;
- be stored in pairs;
- be located so that they can be brought to a person experiencing anaphylaxis within five minutes;
- be clearly labelled as emergency/spare devices;
- be checked regularly for expiry and condition;
- be replaced promptly following use or expiry; and
- be safely disposed of in accordance with appropriate arrangements.

Spare adrenaline locations:

Spare adrenaline devices are stored in the medical cupboard within the school office and are clearly marked.

The school will ensure that pupils are not more than five minutes from appropriate spare adrenaline devices while on the school site.

9. Emergency response to anaphylaxis

Any suspected anaphylactic reaction will be treated as a medical emergency. Staff will follow the pupil's Allergy Action Plan where available and the school's emergency procedures.

In general, staff should:

- **Recognise the possibility of anaphylaxis.**
- **Administer the person's prescribed adrenaline device without delay where indicated by their plan/emergency guidance.**
- If the prescribed device is unavailable, use a suitable school spare adrenaline device where the circumstances meet the requirements for its emergency use.
- **Call 999** and state that the person is suffering from anaphylaxis.
- Follow the instructions of the emergency services.
- Administer a second adrenaline device where required and where appropriate in accordance with emergency guidance.
- Ensure the pupil is accompanied and monitored until emergency services take over.
- Contact the parent/carer as soon as reasonably practicable.
- Record the incident.
- Report the incident to the Headteacher/Allergy Lead.
- Review the circumstances and identify lessons to be learned.

The school will ensure that staff do not delay calling emergency services while attempting to contact parents/carers.

10. Minimising exposure to allergens

The school will take reasonable and proportionate steps to minimise exposure to known allergens. This will include consideration of:

- food allergens;
- contact allergens;
- airborne allergens;
- medicines;
- materials used in lessons;
- animals;
- plants;
- cleaning products;
- art and craft materials;
- science materials; and
- other identified allergens.

Staff planning activities will consider whether a pupil's known allergy creates an additional risk. Where necessary, alternative materials, activities or reasonable adjustments will be considered. The aim is to manage risk without unnecessarily excluding pupils from normal school activities.

11. Food allergies

The school recognises that food is a significant source of allergy risk. The school will maintain arrangements to ensure that:

- known food allergies are communicated appropriately to the catering provider;
- menus and ingredients are checked where necessary;
- allergen information is available for food provided by the school;
- suitable alternatives are provided where required;
- food substitutions do not inadvertently introduce a known allergen;
- catering staff have appropriate allergy training provided;
- cross-contamination risks are considered;
- food preparation and serving procedures minimise allergen exposure;
- food brought into school by pupils, parents/carers or staff is managed appropriately;
- classroom cooking activities consider individual allergies;
- food used for celebrations or special events is managed safely; and
- pupils are not unnecessarily excluded from school food or social activities because of their allergy.

Where food is provided by an external caterer, the school will ensure the contractual arrangements require appropriate compliance with allergen safety requirements. This is currently the case for school meals. The school will ensure that catering contractors provide up-to-date allergen information and notify the school of any changes to ingredients, recipes or suppliers that may affect pupils with allergies.

The school will follow current government guidance concerning food allergens and school food.

12. Food brought into school

Parents/carers and pupils will be provided with clear information about the school's arrangements concerning food brought onto the premises. Where an individual pupil is at significant risk from a particular food allergen, the school may introduce specific arrangements for the classroom, year group or activity.

The school will avoid relying solely on blanket allergen bans where they are not necessary or proportionate. Instead, risk will be assessed and managed with particular regard to the individual pupil's circumstances. The school actively discourages nuts and nut-containing products from being brought onto site. While the school takes all reasonable steps to reduce risk, it cannot guarantee that the environment is completely nut free.

Where a particular food is prohibited from a classroom or activity, this will be communicated clearly to staff, pupils and parents/carers.

13. Classroom activities

Teachers and other staff will consider allergy risks when planning:

- science;
- design and technology;
- art and craft;
- cooking;
- PE;
- gardening;
- nature school;
- sensory activities;
- use of animals; and
- other practical activities.

Where a known allergen is required for an educational activity, staff will assess the risk and identify suitable controls or alternatives. Pupils with allergies will be included in curriculum activities wherever reasonably possible, but parent support and advice may be required to ensure this is possible.

14. School clubs and wraparound care

Breakfast clubs, after-school clubs and other activities organised by or on behalf of the school will follow this policy. The school will ensure that staff supervising these activities:

- have appropriate allergy awareness training;
- know which pupils have significant allergies;
- know how to access emergency medication;
- understand emergency procedures; and
- have access to relevant IHPs and emergency information.

Arrangements will be communicated to external providers operating on the school's premises where appropriate. Where external providers operate on the school site (e.g. after school clubs or

lunchtime clubs), parents remain responsible for informing the provider of any allergy. The school will also take reasonable steps to ensure relevant allergy information is shared where appropriate.

15. Educational visits and trips

Pupils with allergies will be enabled to participate in educational visits, residential trips, sporting events and other off-site activities wherever reasonably possible. Before a visit involving a pupil at risk of anaphylaxis, the school will undertake an appropriate risk assessment.

The risk assessment will consider:

- the pupil's known allergens;
- the destination;
- food arrangements;
- transport;
- accommodation;
- activities;
- access to emergency medical services;
- access to prescribed adrenaline;
- access to spare emergency medication where appropriate;
- trained staff;
- supervision arrangements;
- emergency communication; and
- arrangements for contacting parents/carers.

A pupil at risk of anaphylaxis will have their prescribed adrenaline device available during the visit. Appropriately trained staff will accompany the pupil and be able to administer adrenaline in an emergency.

16. Wellbeing, inclusion and bullying

The school recognises that living with allergy, particularly the risk of anaphylaxis, can cause anxiety or affect a pupil's wellbeing. The school will:

- promote understanding and inclusion;
- avoid unnecessarily identifying or singling out pupils with allergies;
- listen to pupils' concerns;
- provide appropriate pastoral support;
- work with parents/carers where allergy is affecting wellbeing;
- make reasonable adjustments where required;
- ensure pupils are not disadvantaged because of their allergy; and
- address bullying, teasing or discrimination related to allergy.

Bullying or deliberate exposure to an allergen will be treated seriously and dealt with under the school's behaviour and anti-bullying procedures.

The school will work sensitively with pupils and families to decide how much information about an individual's allergy should be shared with peers, and in an age-appropriate way.

17. Information sharing and confidentiality

Information about a pupil's allergy is health information and will be handled sensitively. The school will share information with staff who need it to keep the pupil safe.

Relevant information may be shared with:

- teachers and teaching assistants;
- office and admin staff;
- first aiders;
- lunchtime supervisors;
- catering staff;
- club staff;
- educational visit staff;
- supply and agency staff;
- relevant healthcare professionals;
- emergency services; and
- other individuals where necessary and lawful.

The school will not disclose unnecessary medical information. Health information will be handled in accordance with the school's data protection and privacy arrangements. The DfE confirms that health information is special category data under UK GDPR and should be handled in a controlled and respectful manner.

18. Allergy information available to staff

The school will establish a practical system enabling staff to identify pupils with significant allergies and access relevant information. Information may include:

- pupil name;
- photograph, where appropriate and lawful;
- allergen;
- symptoms;
- emergency medication;
- medication location;
- emergency response;
- IHP/Allergy Action Plan location; and
- relevant contact information.

Information will be updated promptly when circumstances change. The school will have arrangements to ensure that supply, temporary and visiting staff receive appropriate information before supervising pupils, by means of including this information on class cover sheets, and through allergy alerts in classrooms.

19. Serious incidents and near misses

The school will record and respond to serious allergy incidents and near misses. A near miss may include, for example:

- a pupil being given food containing a known allergen but not developing symptoms;
- an allergen being brought into contact with a pupil at risk;
- prescribed emergency medication being unavailable or inaccessible;
- an emergency adrenaline device being out of date;
- staff being unable to locate medication promptly; or
- a significant failure of an agreed allergy control measure.

Following a serious incident or near miss, the school will:

- ensure the pupil's immediate safety;
- obtain medical assistance where necessary;
- inform parents/carers;
- record the incident;
- inform the Headteacher/Allergy Lead;
- consider whether any external reporting requirement applies, including to the Local Authority Health and Safety Team;
- investigate what happened;
- identify underlying causes;
- implement corrective actions;
- communicate relevant learning to staff;
- review the relevant IHP/risk assessment where appropriate; and
- consider whether this policy or associated procedures need amendment.

20. Monitoring and reviews

The Allergy Lead will monitor the implementation of this policy. At least annually, the school will review:

- the allergy register;
- IHPs;
- Allergy Action Plans;
- staff training records;
- prescribed medication arrangements;
- spare adrenaline device locations;
- expiry dates;
- emergency procedures;
- catering arrangements;
- educational visit arrangements;
- incidents and near misses;
- parent/carers feedback;
- pupil feedback where appropriate; and
- relevant changes to legislation or DfE guidance.



Individual Healthcare Plan - Allergy

NAME	PHOTO
Allergy to:	

Child's name

Group/class/form

Date of birth

Child's address

Known allergies

Date

Review date

Annually or when needs change

Family Contact Information

Name (1)

Relationship to child (1)

Contact number (1)

Name (2)

Relationship to child (2)

Contact number (2)

Clinic/Hospital Contact

Name

--

Phone no.

G.P.

Name

Surgery address

Phone no.

Allergy lead in school

Mrs Charlotte Harkins

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Location of prescribed adrenaline devices within school:

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Detail who was involved on the development of this plan

Staff training needed/undertaken - who, what, when

All school staff provided annually with TES training on allergies and anaphylaxis. Admin, SEND and class staff of relevant pupils to undertake annual school nurse training in addition.

Provide details of all whom this for has / will be sent to