Allergy safety policy	
Lead Governor & Member of SLT:	P Tomkins & A Hewitt (School Business Manager)
To be approved by:	FGB
Frequency of review:	Annually
Date approved:	September 2026
Next review date:	September 2027

1. Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils 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:

- Children's Wellbeing and Schools Act 2026
- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

3.1 The governing board

The governing board is responsible for:

- Ensuring the school has an allergy safety policy which sets out:
  - Arrangements to reduce the risk of individuals coming into contact with their known allergens
  - Emergency response plans for cases of anaphylaxis
- Reviewing and approving the allergy safety policy at least annually
- Taking steps to ensure the allergy safety policy is:
  - Generally known within the school and to parents of pupils at the school
  - At least once a year, brought to the attention of all pupils, parents/carers, staff and volunteers
  - Published on the school's website
- Ensuring risks relating to pupils with allergies are included in the risk register and actively managed

3.2 Allergy safety lead

The nominated allergy safety lead is the School Business Manager.

They're responsible for:

- Implementing this allergy safety policy
- Contributing to the review of the allergy safety policy
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils who require support with allergies have an up-to-date individual healthcare plan (IHP)
    - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
    - All staff receive regular allergy awareness 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
    - Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
        - What lessons there are to learn
        - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP

3.3 Headteacher

The Headteacher is responsible for:

- Responsible for day-to-day implementation of this policy.
- Ensures all staff are aware of and adhere to the policy.
- Delegates responsibilities as appropriate, including appointing a Designated Allergy Lead.
- Ensures effective communication with parents, staff and external agencies.

3.4 All Staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety 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
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.7 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AD on their person and only using it for its intended purpose
- Understanding how and when to use their AD

3.8 Pupils without allergies

These pupils are responsible for:

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

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

4. Identification and Information Sharing

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying pupils at risk

Admissions Process
The admissions team will gather initial information about any allergies or special dietary requirements during enrolment.

Initial Assessment and Information Gathering
Before a student starts at Queensbridge School, parents/carers must be asked about their child's special dietary requirements, preferences, food allergies and intolerances. This must be shared with all relevant staff.

We ask that parents/carers proactively inform the school by telephone or email if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

The school recognises that staff, visitors, contractors, volunteers and other adults on site may have allergies that could place them at risk of an allergic reaction whilst on school premises. To help ensure appropriate safeguards are in place:

- New staff will be asked to disclose any known allergies or medical conditions, including severe allergies requiring emergency medication, as part of the recruitment and onboarding process.
- Existing staff will be encouraged to notify the school of any newly diagnosed allergies or changes to their medical needs as soon as possible.
- Relevant information relating to staff allergies will be recorded securely and shared only with those who need to know in order to support the individual's health, safety and wellbeing.
- Where a visitor has a severe allergy, appropriate risk control measures will be discussed and implemented before or during their visit as required.
- Staff organising meetings, events, training sessions or catering provision should consider any known dietary or allergy requirements of attendees and take reasonable steps to reduce the risk of exposure to allergens.
- In the event of an allergic reaction involving a staff member or visitor, emergency procedures will be followed, including contacting emergency services where necessary and administering emergency medication if appropriate and authorised.

4.3 Individual healthcare plans (IHP)

All pupils whose allergy or medical condition requires support, risk reduction measures, medication, emergency planning or reasonable adjustments (or where specified by a healthcare professional) will have an Individual Healthcare Plan (IHP).

Individual Healthcare Plans will be developed in partnership between the school and

parents/carers, and, where appropriate, the student and their healthcare professionals (e.g. GP, allergy specialist).

The Individual Healthcare Plan will detail:

- The specific allergy/allergens.
- Recognised symptoms of a reaction (mild, moderate, severe).
- Steps to minimise exposure.
- Specific instructions for administering medication (e.g. AAI dosage, location and when to administer).
- Emergency contacts and procedures (who to call, when to call 999).
- Any other relevant information (e.g. asthma management, which can impact allergy severity).

4.4 Allergy and asthma action plans

- All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.
- All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.
- The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.
- The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Register of pupils with known allergies

The school maintains a register of pupils who have a known allergy. This is maintained on the schools management information system.

Relevant allergy information will be shared with all staff.

Allowing all pupils to keep their ADs with them will reduce delays and allows for confirmation of consent without the need to check the register.

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

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

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

6. Minimising risk

6.1 Catering and Food Management

- All Queensbridge School food providers (in-house and external caterers) will comply with the Supporting children and young people with medical conditions and allergy guidance and the Food Information Regulations 2014, providing clear allergen information for all food served.
- Detailed allergen matrices will be available and regularly updated. This is the responsibility of the schools catering provider and is maintained by them.
- Catering staff will receive specific training on allergen awareness, cross contamination prevention and emergency procedures.
- Individual dietary requirements for students with allergies will be communicated to catering staff well in advance.
- Specific measures to prevent cross-contamination will be in place (e.g. dedicated preparation areas, colour-coded equipment and separate serving procedures).

6.2 Classroom and Curriculum Activities

- Staff will consider food allergies when planning activities involving food (e.g. cooking lessons, science experiments, art projects, rewards). Non-food alternatives will be offered.
- The sharing of food in school is strongly discouraged.

6.3 Environment

- Regular cleaning routines will be in place to minimise allergen residues on surfaces.
- Encourage students to wash hands before and after eating.
- While we cannot guarantee an allergen-free environment, we aim to minimise risk through robust management.

7. Procedures for handling an allergic reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of adrenaline to minimise delays in an emergency
- If the pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
    - The pupil does not have a prescribed AD
    - The pupil's prescribed AD are not available or misfire

8. Adrenaline devices (ADs)

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

8.1 Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Pupils with prescribed ADs should take them home with them at the end of each school day, and parents are responsible for ensuring that they are in date.

If a pupil cannot keep their ADs with them in the classroom (due to age or other considerations), then the devices will be stored:

- In an appropriate central location that is unlocked and accessible at all times
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

8.2 Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school's spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma **reliever** inhaler and ensuring they are stored according to the guidance.

- Where the ADs will be sourced (i.e. a local pharmacy)
- The number of ADs required
- Which brand(s) of ADs are purchased (schools are recommended to buy a single brand to avoid confusion)
- The dosage required (based on Resuscitation Council UK's age-based criteria, see page 11 of the AAI guidance)

Spare ADs will be stored:

- In an appropriate central location that is unlocked and accessible to staff only at all times
- No more than 5 minutes away from where they may be needed (larger schools may require ADs to be stored in multiple locations, such as near the dining area and playground)
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions.

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

In an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events

9. Serious incidents and ‘near misses’

A serious incident is any event relating directly to a medical condition (including allergy) in which a pupil, 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.

9.1 Incident recording

The school will record serious incidents and ‘near misses’ relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and ‘near misses’ in a ‘no blame’ spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a pupil aged up to 16 should be notified of the incident or ‘near miss’ as soon as possible.

In the case of a pupil aged 16 and over, the school will confirm that the pupil agrees that their parents/carers should be informed.

The school will share the report with the pupil’s parents, the pupil or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with the School Business Manager. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil’s IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff.

In the event that the incident or ‘near miss’ was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school has purchased 'training pens' from EpiPen and Jext so staff can practise safely and be familiar with the differences.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist

- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')

10.2 Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

11. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

12. Monitoring arrangements

The arrangements set out in this policy will be monitored by the allergy safety lead.

The governing board will review and approve this policy annually, or more frequently if a serious incident or 'near miss' identifies an area for improvement.