SIR JOHN THURSBY COMMUNITY COLLEGE

Allergy Policy

Reviewed:	September 2026
Date approved by Governors:	To be reviewed 8th December 2026
To be reviewed:	September 2027
Person Responsible:	**School Business Manager**

AMBITION
RESPECT
BELONGING

Allergy Safety Policy

1. Aims

This policy sets out the school's approach to allergy safety. It aims to reduce the risk of students, staff and visitors coming into contact with known allergens, ensure rapid and effective emergency response where allergic reactions occur, support the wellbeing and inclusion of students with allergies, and promote whole-school allergy awareness.

2. Legislation and guidance

This policy is based on the Department for Education's statutory guidance on allergy safety in schools, the statutory guidance on supporting students with medical conditions at school, Department of Health and Social Care guidance on using emergency adrenaline auto-injectors in schools, the Food Information Regulations 2014, the Food Information (Amendment) (England) Regulations 2019 and relevant duties under the Children and Families Act 2014 as amended by the Children's Wellbeing and Schools Act 2026.

3. Roles and responsibilities

The Governing Board is responsible for ensuring that the school has an allergy safety policy, that allergy-related risks are actively managed, and that the policy is published and reviewed at least annually. The Headteacher is responsible for ensuring that appropriate systems, staffing, training and resources are in place. The School Business Leader is the allergy safety lead and is responsible for day-to-day implementation, oversight of allergy records, staff awareness, review of Individual Healthcare Plans and learning from incidents and near misses.

The SENDCo is responsible for ensuring Health Care Plans are in place for all students with known allergies.

All teaching and support staff must understand this policy, know how to identify students with allergies in their care, reduce the risk of exposure to known allergens, recognise possible allergic reactions and anaphylaxis, and seek emergency help without delay. Parents and carers are responsible for providing accurate and up-to-date medical information, supplying prescribed medication where required, and informing the school promptly of any changes. Students will be encouraged, in an age-appropriate way, to understand their allergies, follow agreed arrangements and seek help immediately if they feel unwell.

4. Identifying individuals at risk

The school will identify students with known allergies through admissions information, data checks, parental updates, transition information from previous settings and information from healthcare professionals where provided. Records will include known allergens, symptoms, prescribed medication, whether adrenaline devices have been prescribed, emergency contact details and whether an Allergy Action Plan, Asthma Action Plan or Individual Healthcare Plan is in place.

Students will have an Individual Healthcare Plan where their allergy has a functional impact in school, places them at risk of harm and requires arrangements that are additional to or different from those made generally. Allergy and asthma action plans issued by healthcare professionals will be attached to or referenced in the Individual Healthcare Plan and reviewed whenever updated information is received.
The school will identify staff with known allergies through induction arrangements ensuring risk assessments are in place and shared with appropriate colleagues.
The school will identify visitors with known allergies through reception arrangements

5. Assessing and minimising risk

The school will take reasonable steps to reduce allergy risks across classrooms, dining areas, social spaces, outdoor areas, enrichment activities and off-site visits. Staff planning lessons or activities must consider potential exposure to food, airborne, contact, animal, insect-sting or chemical allergens, including in food technology, science, art, craft, music, fundraising events and practical activities.
Food sharing is discouraged, students will be reminded to wash hands before and after eating, and food containers, utensils and named water bottles must not be shared.
Catering arrangements will include clear allergen information, communication with parents and carers about special dietary needs, safe preparation procedures to reduce cross-contamination, and checks when menus or ingredients change. Food allergen information will be managed in line with applicable food information and labelling requirements.

6. Visits, trips and off-site activities

Students with allergies will not be excluded from visits, trips or enrichment activities because of their allergy. Risk assessments will be completed for students at risk of anaphylaxis and will consider transport, catering, medication, trained staff, emergency access, communication with venues and arrangements for students to carry or have rapid access to prescribed adrenaline devices. Staff trained to administer adrenaline will accompany students at risk of anaphylaxis where required.

7. Procedures for handling an allergic reaction

If a student, member of staff or visitor shows signs of an allergic reaction, staff must follow the individual's action plan where available and seek help immediately. Where anaphylaxis is suspected, adrenaline must be administered without delay, emergency services must be called, and parents or emergency contacts must be informed as soon as possible. Staff must not wait to see whether symptoms improve before escalating a suspected anaphylactic reaction.

8. Adrenaline devices and emergency medication

Students who are prescribed adrenaline devices should always have rapid access to them, including in lessons, dining areas, outdoor spaces, sports areas and on visits. Two devices should be available wherever possible. Prescribed devices will be stored in line with the student's Individual Healthcare Plan and manufacturer instructions, protected from extremes of temperature and direct sunlight, and never locked away where delay could occur.
The school will maintain spare adrenaline auto-injectors for emergency use in line with Department of Health and Social Care guidance. Spare devices will be clearly labelled, checked monthly by nominated staff, replaced before expiry or immediately after use,

and kept in locations that allow them to be brought to a person experiencing anaphylaxis within five minutes wherever reasonably practicable.

9. Serious incidents and near misses

All serious allergy-related incidents and near misses will be recorded, reported and reviewed. Records will include who was affected, what happened, when and where it happened, the suspected cause, how staff responded, whether emergency services were contacted and what support was provided afterwards. The school will review incidents in a no-blame learning culture and will update risk assessments, Individual Healthcare Plans, staff training or this policy where lessons are identified.

10. Staff training and allergy awareness

10.1 Annual staff training

All staff who are present when students are scheduled to be on site will receive allergy awareness and emergency response training at least annually. This includes teaching staff, support staff, temporary staff, supply teachers, agency staff, peripatetic staff, catering and staff and regular volunteers.

10.2 Training content

Training will ensure that staff understand what allergy is, the risks it can pose, how allergic reactions may occur and how to reduce risk in school. Staff will learn about food allergy, asthma, eczema, hay fever, contact allergy, insect-sting allergy and other allergic conditions, including how these conditions can co-exist. Training will also cover the difference between food allergy, coeliac disease and food intolerance.
Staff training will include how to identify allergy triggers, recognise the range of symptoms of allergic reactions, recognise signs of anaphylaxis and respond in an emergency. This includes calling emergency services, informing parents or carers, locating prescribed or spare emergency medication, administering adrenaline for suspected anaphylaxis, using an emergency asthma reliever inhaler where appropriate and following the relevant Allergy Action Plan, Asthma Action Plan or Individual Healthcare Plan.

10.3 Induction, supply and cover staff

New staff will receive allergy safety information as part of their induction. Supply, agency and cover staff will be given clear information about relevant students, emergency procedures, the location of emergency medication and who to contact for immediate assistance. Where a member of staff is supervising a student with a known risk of anaphylaxis, they must know how to access and follow the student's action plan.

10.4 Practical emergency response practice

Staff who may be required to respond in an emergency will be shown how to use adrenaline auto-injector training devices and will be reminded that adrenaline should be administered as soon as anaphylaxis is suspected. The school will periodically test emergency arrangements, such as locating medication and contacting first aiders or senior staff, and will use learning from drills, incidents and near misses to strengthen procedures.

10.5 Training records and review

The allergy safety lead will maintain records of staff training, including dates completed, staff groups covered and any follow-up actions required. Training will be reviewed annually and updated sooner where statutory guidance changes, new risks are identified, a student's needs change, or an incident or near miss indicates that staff knowledge or emergency response arrangements need strengthening.

11. Wellbeing and inclusion

The school recognises that allergy can affect a student's confidence, independence, social participation and emotional wellbeing. Students with allergies will be supported through pastoral systems, tutor or key adult check-ins where appropriate, reasonable adjustments, reassurance about risk management arrangements and access to wider wellbeing support if needed. Bullying linked to allergy, food, medication or health needs will be addressed in line with the behaviour and anti-bullying policies.

12. Information sharing and confidentiality

Health information relating to allergies is special category data and will be handled in line with UK GDPR, the Data Protection Act 2018 and the school's data protection policy. Information will be shared only with staff and relevant adults who need it to keep individuals safe, and in a way that is respectful, proportionate and avoids unnecessary disclosure.

13. Monitoring and review

This policy will be monitored by the allergy safety lead and reviewed at least annually by the Senior Leadership Team and governing board. It will also be reviewed sooner if there is a serious incident, near miss, change in statutory guidance, change in medical advice or evidence that existing arrangements require improvement. The policy will be published on the school website and made available in hard copy on request.

14. Links to other policies

This policy should be read alongside the school's health and safety policy, supporting students with medical conditions policy, educational visits policy, behaviour and anti-bullying policies, data protection policy and any relevant catering or risk assessment procedures.