HAMPDEN GURNEY
C of E PRIMARY SCHOOL

Allergy Safety Policy

Date approved:
Review date: October 2027
Named senior lead for allergy safety: Eva Valverde

"Ask and it will be given to you; seek and you will find; knock and the door will be opened to you." Matthew 7: 7

Purpose

- To ensure that pupils with allergic conditions (including food allergy, insect sting allergy, medication allergy, eczema and allergy-related asthma) are identified, supported, included and kept safe across all aspects of school life.
- To set out consistent, whole-school arrangements for prevention, preparation and emergency response to allergic reactions and anaphylaxis that comply with UK legislation and statutory guidance.
- To promote the wellbeing and inclusion of pupils with allergy so they can participate fully in education, trips and extracurricular activities.
- To ensure staff, parents/carers and governors understand roles and responsibilities and that the policy is reviewed and kept up to date.

Framework note: This policy is written to align with statutory guidance "Allergy Safety in Schools" (July 2026) and OFSTED (2025) inspection framework expectations on Safeguarding, Inclusion, Curriculum and Teaching, Achievement, Attendance and Behaviour, Personal Development and Leadership and Governance.

Scope

- Applies to all pupils, staff, volunteers, governors, contractors and visitors at Hampden Gurney Primary School and to activities organised by the school (including off-site visits and before/after school provision).

- Covers identification, prevention, handling and emergency response to allergies and anaphylaxis, plus wellbeing measures and incident learning.

Legal and statutory context

- Keeping Children Safe in Education 2026; Working Together to Safeguard Children; Health and Safety at Work etc. Act; Medicines Act and Human Medicines Regulations; Special Educational Needs and Disabilities (SEND) Regulations; Equality Act 2010; Allergy Safety in Schools statutory guidance (July 2026).
- School will have regard to local authority advice and NHS guidance on anaphylaxis management.

Key principles

- Every pupil with allergy will be treated with dignity, confidentiality and sensitivity.
- Reasonable adjustments will be made so pupils with allergy can participate safely in all activities.
- Prevention of exposure to known allergens is the first line of defence; robust emergency arrangements are maintained in case of accidental exposure.
- Staff training in allergy awareness, avoidance strategies and emergency response (including anaphylaxis and acute asthma) is mandatory and refreshed regularly.
- The school will work in partnership with parents/carers, health professionals (including GPs, consultants, school nurses), and the pupil to develop Individual Healthcare Plans where appropriate.

The school recognises allergy safety as a safeguarding responsibility. Failure to identify, assess and appropriately manage allergy risks may place pupils at risk of harm and will therefore be addressed through the school's safeguarding procedures where appropriate.

Roles and responsibilities

Governing Body

- Ensure the school has a written and published allergy safety policy and resources to implement it.
- Ensure a named senior lead for allergy safety is designated and that the policy is reviewed at least annually.
- Monitor that school complies with statutory guidance and that incidents are reported, recorded and lessons learned.

Headteacher / Senior Leadership Team

- Appoint and support the named senior lead for allergy safety.

- Ensure implementation across school, allocation of training and appropriate storage/resources (including spare adrenaline devices if lawful/required).
- Ensure systems for record-keeping, information sharing, risk assessment and Individual Healthcare Plans (IHPs) are in place and reviewed.
- Ensure incident reporting and follow-up, including reporting to governors and statutory bodies where necessary.

Named senior lead for allergy safety – Eva Valverde

- Maintain an up-to-date register of pupils with allergies and ensure information is shared appropriately.
- Coordinate training, individual planning (IHPs), review of incidents and policy review.
- Act as point of contact for families, staff and external health services.
- Ensure spare adrenaline devices and emergency medical supplies are checked, in date and accessible.

Class teachers and support staff

- Know pupils in their class with allergies and follow risk-reduction measures in their daily routines and lessons.
- Be trained and confident to recognise signs of allergic reaction and to use emergency medication where authorised.
- Maintain supervision during mealtimes and activities and implement reasonable adjustments.
- Ensure inclusion of pupils with allergy in lessons, PE, trips and clubs, following the pupil's IHP.

First aiders / pastoral / welfare staff

- Maintain up-to-date anaphylaxis training and competency in administration of adrenaline auto-injectors and asthma emergency response.
- Keep records of training, incidents and medication administration.
- Check emergency medication storage and expiry regularly.

Parents / carers

- Inform the school on admission and whenever there is a diagnosis or change of medical information about their child's allergy.
- Provide up-to-date medical documentation, prescribed medication (in-date), Allergy Action Plans and contact details.
- Work with school to agree and review Individual Healthcare Plans and risk assessments.
- Provide written consent for medication administration where required.

Pupils

- Pupils (where age-appropriate) should be supported to understand their allergy, recognise triggers and participate in self-care if safe and agreed in their IHP.

- Pupils should not share food or swap snacks and should follow school rules for safety.

Supporting Pupils to Manage Their Allergy

The school recognises the importance of supporting pupils to develop age-appropriate understanding of their allergy and confidence in managing their condition safely.

Where appropriate and agreed by parents/carers and healthcare professionals, pupils will be supported to:

- understand their allergy and known triggers;
- recognise signs and symptoms of allergic reactions;
- understand allergen avoidance strategies;
- seek help promptly when required;
- understand how and when emergency medication may be used;
- participate in decisions regarding their support and safety arrangements.

Any agreed level of self-management will be documented within the pupil's Individual Healthcare Plan (IHP) and reviewed regularly. The school recognises that a pupil's ability to self-manage will vary according to age, maturity, understanding and medical advice.

Unacceptable Practice

The school recognises that some practices place pupils at unnecessary risk and are therefore unacceptable.

The school will not:

- prevent pupils from accessing prescribed emergency medication;
- assume that a pupil can self-manage their allergy without appropriate assessment and agreement;
- exclude pupils from educational activities, clubs, visits, enrichment opportunities or curriculum activities solely because they have an allergy;
- ignore medical advice, Allergy Action Plans or Individual Healthcare Plans;
- leave a pupil experiencing symptoms of an allergic reaction without supervision;
- delay emergency treatment while attempting to contact parents/carers;
- require parents/carers to attend school to administer emergency medication where appropriately trained staff are available;
- create avoidable barriers to participation where reasonable adjustments can be made;
- tolerate allergy-related bullying, intimidation, exclusion or harassment.

The school is committed to ensuring that pupils with allergies are supported safely, effectively and inclusively.

Visitors, volunteers, contractors

- School will make visitors aware of allergy safety arrangements and ensure risk-reduction measures are communicated where relevant.

Identification and information sharing

- On admission and at transition points, parents/carers are asked to declare any allergy on the school's medical form.
- The named senior lead maintains a current allergy register (accessible to staff who need to know) that includes:
    - diagnosis, triggers, typical reaction, severity, prescribed medication (type and location), emergency contacts, a copy of Allergy Action Plan/Asthma Plan and GP/consultant details.

Transition Arrangements

The school recognises that transitions can present additional risks for pupils with allergies and will take appropriate steps to ensure continuity of care.

- Allergy information will be reviewed whenever pupils move classes, key stages or educational settings.
- Relevant information, IHPs, Allergy Action Plans and risk assessments will be shared with receiving staff on a need-to-know basis.
- Transition meetings will be arranged where appropriate for pupils with complex medical needs.
- Pupils and families will be supported to familiarise themselves with new environments, routines and key staff.
- For pupils transferring to another school, relevant allergy information will be shared with the receiving setting with appropriate parental consent.

These arrangements aim to minimise risk and maintain safe support during periods of change.

- Individual Healthcare Plan (IHP):
    - Any pupil whose allergy requires school to hold medication, or where emergency response arrangements are needed, must have an IHP agreed by parents, school and health professional where appropriate.
    - IHPs must include: details of allergy and triggers, usual symptoms, prescribed medication and dosage, storage/location of medication, who is trained to administer, emergency contact details, and steps to reduce exposure.

    - IHPs reviewed at least annually and after any significant incident or change in condition.
- Data protection: Personal medical information will be shared only with those staff who need to know to keep the pupil safe and in line with the school's data protection policy.

Emergency Information

The school will ensure that essential emergency information relating to pupils with allergies is readily accessible to staff who need it in order to keep the pupil safe.

This may include:

- allergy triggers;
- typical symptoms;
- prescribed medication;
- emergency actions required;
- emergency contact details;
- location of medication.

Information will be shared in line with data protection requirements whilst ensuring that pupils remain safe.

Prevention and risk reduction (school-wide)

- Awareness and culture
    - Regular whole-school awareness raising about allergies and anaphylaxis through assemblies, PSHE, staff briefings and communications to parents.
    - Clear expectations: no sharing of food; respect for medical restrictions; anti-bullying measures that specifically address allergy-related bullying (including forced feeding, use of allergens to threaten or exclude).
    - Kitchen/catering: catering staff will be trained in allergen management in line with food safety regulations and will provide allergen information for all meals. Packed lunch guidance for parents will be shared.
- Environmental controls
    - Where appropriate, reasonable controls may be implemented (e.g., designated eating areas, hand-washing before/after eating, cleaning routines) but the school will not create a false sense of total "nut-free" guarantees unless a specific risk assessment supports such a rule.
    - Clear signage and communication for lunchtime staff and visitors.
- Curriculum and inclusion

    - Ensure pupils with allergy can participate fully with reasonable adjustments (e.g., alternative materials/ingredients in DT, planned seating at lunches).
    - Use curriculum opportunities to teach empathy, safety and basic first aid/anaphylaxis awareness across age-appropriate stages.
- School trips, off-site activities and transport
    - Risk assessments for all trips must identify pupils with allergies, describe arrangements for medication storage and access, and name staff responsible. Parents/carers must be consulted and give written consent.
    - At least one trained staff member who knows the pupil and the IHP should accompany off-site activities where necessary.
    - Emergency medication and a copy of the IHP should travel with the pupil. Consideration for public transport and coach storage must be made.
- After-school clubs and externally-provided activities
    - External providers must follow the school's allergy procedures or provide their own that meet the school standard; school to confirm compliance before pupils attend.

Medication, storage and emergency devices

- Prescribed medication
    - Parents/carers should supply in-date prescribed medication in original packaging, clearly labelled with the pupil's name and dosage instructions.
    - Pupils with adrenaline auto-injectors should have their own prescribed device in school, stored as agreed in IHP and accessible immediately.
- Spare adrenaline devices
    - School will maintain spare emergency adrenaline auto-injector(s) where permitted by law and guidance (following NHS and Department for Education guidance) and recorded procedures for use, storage and consent.
    - Spare devices will be stored securely but accessible to trained staff and checked weekly for expiry.
- Storage and access
    - Where possible, medication is stored in a locked cupboard with clear access arrangements. Some emergency medication (adrenaline auto-injectors/asthma inhalers) must be readily available and stored unlocked where safe.
    - All staff know where emergency medication is stored and how to access it.
- Record-keeping for medication use

    - Every administration of medication must be recorded (date, time, dose, person administering and witness) and parents/carers informed.
    - Incidents of allergic reaction (including near-misses) must be logged, investigated and used to inform policy/practice.

Recognising and responding to allergic reactions and anaphylaxis

- Signs and symptoms
    - Staff are trained in recognising symptoms of mild allergy reactions (rash, itching, sneezing, stomach pain) and anaphylaxis (difficulty breathing, swelling of throat/lips, persistent dizziness, collapse).
    - Acute asthma and anaphylaxis co-presenting must be recognised; first aiders are trained to manage both.
- Emergency response
    - Follow the pupil's Allergy Action Plan/IHP. If anaphylaxis is suspected:
        - Use the adrenaline auto-injector immediately (do not delay to call ambulance).
        - Call emergency services (999) immediately after giving the auto-injector.
        - Lay the pupil flat unless breathing difficulties require sitting up; if unconscious and breathing, place in recovery position and monitor.
        - Give a second auto-injector after 5 minutes if no improvement (and if available and trained to do so).
        - Transport to hospital should be by ambulance — do not use personal vehicles unless directed by emergency services.
    - Record the incident and notify parents/carers immediately.
- Staff responsibilities in emergencies
    - A trained first aider should lead the clinical response; other staff to support, call for emergency services and manage the environment (clear a path, reassure pupils).
    - Staff must not attempt to diagnose beyond basic observation — follow the IHP and emergency protocols.

Training and competence

- All staff
    - Receive basic allergy awareness training (including food allergy and anaphylaxis signs) at induction and annual refreshers.
    - Understand school policy, pupil IHP locations, and basic prevention measures.
- Designated staff / first aiders

    - Receive specialist training in anaphylaxis management (including adrenaline auto-injector use) and asthma emergencies from accredited trainers, with competency assessed and refreshed at least annually or as recommended by health professionals.
    - Maintain records of training and competency.
- Governors and senior leaders
    - Receive information about their responsibilities and the school's arrangements for allergy safety.
- Training records and evaluation
    - The named senior lead will maintain the training log and ensure training is evaluated, updated after incidents or guidance changes.

Supply Staff, Agency Staff and Volunteers

The school will ensure that temporary or visiting adults working with pupils receive appropriate allergy safety information.

This includes:

- supply teachers;
- agency staff;
- trainee teachers;
- volunteers;
- peripatetic staff;
- contractors supervising pupils.

Relevant individuals will be informed of:

- allergy safety procedures;
- emergency response arrangements;
- locations of medication;
- pupils requiring specific support;
- procedures for obtaining urgent assistance.

Information will be shared in a manner that protects confidentiality whilst ensuring pupil safety.

Bullying, wellbeing and inclusion

- The school recognises the emotional and social impact living with allergy can cause and will:

    - Provide reassurance and information to pupils with allergy and their families about safety measures.
    - Include allergy considerations in anti-bullying policy; investigate and sanction allergy-related bullying.
    - Offer pastoral support and access to school counsellor or external services when needed.
    - Consider inclusion adjustments so pupils do not feel unnecessarily singled out (e.g., private arrangements for medication storage, inclusive classroom activities).
- Key wellbeing measures:
    - Regular communication with families.
    - Opportunities for pupil voice and involvement in policy review and awareness events.
    - Ensure new joiners with allergies receive induction and tour of relevant areas (kitchen/canteen).

Learning from Near Misses

The school recognises that near misses can provide valuable opportunities to improve allergy safety arrangements.

Following any allergic reaction, medication error, accidental exposure or near miss:

- the incident will be recorded promptly;
- the Allergy Safety Lead will investigate the circumstances;
- parents/carers will be informed where appropriate;
- Individual Healthcare Plans and associated risk assessments will be reviewed;
- additional training will be arranged where necessary;
- lessons learned will be shared appropriately with relevant staff;
- governors will be informed of significant incidents and resulting actions.

Where trends or recurring concerns are identified, the school will take prompt action to reduce future risk.

Communication and publishing the policy

- The policy will be published on the school website and provided to staff, governors, parents and carers.
- Parents/carers will be reminded annually to update medical information.
- Clear signage will be placed in staffrooms and key areas about storage/location of emergency medication and who to contact.

Annual Review of Medical Information

At least annually, parents/carers will be invited to review and confirm:

- allergy diagnoses;
- prescribed medication;
- emergency contact details;
- Individual Healthcare Plans;
- Allergy Action Plans;
- consent arrangements.

Parents/carers are expected to inform the school immediately of any changes in their child's medical condition, treatment, medication or allergy status.

Record keeping and confidentiality

- Maintain secure records of IHPs, medication logs, training logs and incident reports.
- Share medical information only on a need-to-know basis in line with data protection rules and the school's data protection policy.
- Retain records in line with statutory retention schedules.

Equality and reasonable adjustments

- The school will ensure compliance with the Equality Act 2010 by making reasonable adjustments for pupils with allergies and treating allergy as a long-term health condition where appropriate.
- Consideration will be given to children with complex medical needs who may require additional support.

Monitoring, evaluation and review

- The named senior lead will:
    - Review the policy at least annually or sooner following incidents or changes in statutory guidance.
    - Report to governors on training, incidents and policy effectiveness.
    - Seek feedback from pupils, parents and staff and involve them in policy review.

Inspection and Quality Assurance

The governing body and senior leaders will periodically review allergy safety arrangements to ensure compliance with statutory guidance, safeguarding duties and Equality Act responsibilities.

The school will maintain evidence relating to:

- staff training;

- Individual Healthcare Plans;
- medication audits and expiry checks;
- risk assessments;
- incident and near-miss investigations;
- policy reviews and resulting actions.

- Key review triggers:
    - Any serious allergic incident or near-miss.
    - New clinical guidance or legislation.
    - Changes in school context, such as new catering arrangements or increased numbers of pupils with allergies.

Approval

- Signed: Headteacher
- Signed: Chair of Governors
- Review date: