Allergy Policy

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Contents

Aims 3
Legislation and guidance 3
Roles and responsibilities 3
Culture & training 5
Risk management 6
Individual Healthcare Plans (IHCPs) 7
School wide policies 7
Visits and trips 9
Policy details 9

1. Aims

1.1 This policy aims to:

- 1.1.1 Set out the school's approach to allergy management, including risk management and procedures to deal with allergic reactions
- 1.1.2 Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- 1.1.3 Promote and maintain allergy awareness amongst the academy

2. Legislation and guidance

2.1 This policy is based on the following relevant legislation:

- 2.1.1 Department for Education (DFE)'s guidance on allergies in schools
- 2.1.2 Supporting pupils with medical conditions at school
- 2.1.3 The Children's Wellbeing and Schools Act 2026
- 2.1.4 Keeping Children Safe in Education
- 2.1.5 Using emergency adrenaline auto injectors in schools
- 2.1.6 The Food Information Regulations 2014
- 2.1.7 The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

3.1 The Principal/Headteachers is responsible for the implementation of this policy

3.2 The named member of the senior leadership team responsible for allergy safety is Sophie Funnell. They are responsible for:

- 3.2.1 Promoting and maintaining allergy awareness across our school community
- 3.2.2 Recording and collating allergy and special dietary information for all relevant pupils, ensuring this is recorded accurately on the school's MIS
- 3.2.3 Ensuring that all allergy information is accurately held and available for all staff to view
- 3.2.4 Leading on all staff training for allergy safety, including making sure staff are aware of the school's policies and procedures regarding allergies
- 3.2.5 Ensuring all relevant pupils with allergies have an IHCP and that their allergy action plan has been received/completed by a medical professional
- 3.2.6 Liaising with staff to ensure pupils who need an allergy risk assessment receive one
- 3.2.7 Keeping stock of the school's medication, including the school's adrenaline auto-injector supply
- 3.2.8 Regularly liaising with the Trust's Safeguarding Lead on all allergy matters
- 3.2.9 Working with HR to ensure all staff have completed mandatory allergy awareness/safety training

3.3 Whilst Sophie Funnell is the allergy safety lead, Phoenix is committed to a whole-school approach to allergy safety and awareness

3.4 As part of the academy's drive towards allergy safety, the Welfare Lead will work in partnership with the named person on the senior leadership team responsible for allergy safety.

3.5 The Welfare Lead is responsible for:

- 3.5.1 Ensuring they have received the relevant training for this role
- 3.5.2 Co-ordinating paperwork and information from families regarding medical needs and allergies
- 3.5.3 Co-ordinating medication with families
- 3.5.4 Taking stock and replenishing school emergency supplies, such as the school's adrenaline auto-injectors (AAI)
- 3.5.5 Leading on the creation of the school's IHCPs. Including those for allergies and/or anaphylaxis
- 3.5.6 Inputting medical needs, including allergies, onto the academy's MIS and regularly reviewing these to ensure they are accurate at all times
- 3.5.7 Liaising with key personnel to keep them informed about allergy safety matters This includes informing the School Catering Manager of pupils with food allergies and liaising with external health professionals where needed
- 3.5.8 Maintaining the central medical needs register, including for pupils with allergies and asthmatic needs
- 3.5.9 Any other appropriate tasks delegated by the allergy safety lead

3.6 Teaching and support staff are responsible for:

- 3.6.1 Promoting and maintaining allergy awareness amongst pupils
- 3.6.2 Maintaining awareness of our allergy policy and procedures
- 3.6.3 Attending relevant training as required
- 3.6.4 Being able to recognise the signs of severe allergic reactions and anaphylaxis
- 3.6.5 Being aware of specific pupils with allergies in their care
- 3.6.6 Carefully considering the use of food or other potential allergens in lesson and activity planning
- 3.6.7 Ensuring the wellbeing and inclusion of pupils with allergies

3.7 Parents/carers are responsible for:

- 3.7.1 Being aware of our school's allergy policy
- 3.7.2 Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- 3.7.3 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
- 3.7.4 Carefully considering the food they provide to their child as packed lunches and snacks
- 3.7.5 Following the school's guidance on food brought in to be shared
- 3.7.6 Updating the school on any changes to their child's condition
- 3.7.7 Reporting any delayed allergic reactions to exposures of allergens which have taken place in school

3.8 Pupils with allergies are responsible for:

3.8.1 Being aware of their allergies and risks they pose
3.8.2 Being aware of signs and symptoms of an allergic reaction and self-reporting this to a member of staff as soon as is realised
3.8.3 If age appropriate, always carrying medication on them, including adrenaline auto-injectors, antihistamines or inhalers
3.8.4 Knowing how to self-administer emergency medication, such as adrenaline auto-injectors, if required

3.9 Pupils without allergies
3.9.1 Being aware of allergens and the risks they pose to their peers
3.9.2 Understanding that any unsafe behaviour within the academy in sanctionable against the behaviour policy

4. Culture & training

4.1 Details of the academy's allergy awareness and training can be found in this section of our policy

4.2 All staff present during times when pupils are scheduled to be on site will be trained in allergy awareness and emergency response. This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency staff, regular volunteers, caterers, and staff who oversee children during breakfast or afterschool clubs.

4.3 Training includes:
4.3.1 All-staff modules allocated on IAM Compliant
4.3.2 "Leading allergy safety" training for the named member of the leadership team overseeing allergy safety
4.3.3 "Managing allergy safety" training for medical leads
4.3.4 Additional training allocated based on the contextual medical needs of the academy

4.4 The sum of these trainings will ensure that staff will:
4.4.1 Have an awareness of allergies, the risk allergies pose, how allergic reactions can occur and how to manage it;
4.4.2 Understand that allergies can include multiple conditions (food allergy, asthma, eczema, hay fever and others) which can co-exist;
4.4.3 Knowing the difference between food allergy, coeliac disease and food intolerance;
4.4.4 Know where to find information on allergy triggers;
4.4.5 Can identify the range of symptoms of allergic reactions;
4.4.6 Understand and can recognise anaphylaxis;
4.4.7 Understand the impact an allergy can have on their wellbeing;
4.4.8 Understand the academy's allergy safety policy;
4.4.9 Know how to check whether a pupil has an allergy
4.4.10 Know the purpose and importance of an allergy or asthma action plan
4.4.11 Know that all staff are responsible for reporting allergic reactions (whether an 'incident' or 'near miss') and will learn the process of how to do so
4.4.12 Know how to respond in an emergency, including:

4.4.12.1 The process for either calling emergency services, notifying a member of staff or informing parents

4.4.12.2 How to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever for asthma attack)

4.5 Staff who join mid-year, supply and cover staff will receive allergy training during their induction

4.6 Training under this policy is understood as allergy awareness and emergency response training. It does not replace any separate clinical governance, competence, or delegation arrangements which may be needed where a child or young person requires an IHCP beyond school-lever allergy safety arrangements

4.7 The academy will report all allergy related serious incidents or "near misses". This includes incidents where the pupil experiences a delayed reaction outside of school as a result of exposure during the school day.

4.8 Pupils with medical conditions such as allergies, asthma or anaphylaxis will be kept on a central register. This register will be shared with staff via the staff central Sharepoint and via regular staff bulletins and, should there be changes to the register, staff will be updated within regular staff bulletins.

5. Risk management

5.1 The following strategies will be implemented across the academy to minimise risk:

5.1.1 Catering

5.1.1.1 Catering staff receive appropriate training and are able to identify pupils with allergies

5.1.1.2 School menus are available for parents/carers to view online with food ingredients clearly labelled.

5.1.1.3 Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)

5.1.1.4 Where changes are made to the school menu, making sure these continue to meet the dietary needs of the school

5.1.1.5 Hygiene safety practices to take place

5.1.2 Food restrictions

5.1.2.1 The academy acknowledges it is impractical to enforce an allergen-free school. However, the academy encourages pupils and staff to avoid bringing in certain high-risk foods to reduce the chance of allergic reactions. This includes:

5.1.2.1.1 Packaged nuts; cereals, granola or chocolate bars containing nuts; peanut butter or chocolate sauces containing nuts; peanut-based sauces such as satay; sesame seeds and foods containing sesame seeds

5.1.2.2 If a member of staff or pupil brings these foods in, they might be asked to eat away from others to minimise risk, or the food might be confiscated

5.1.3 Pupils are not permitted to share food with others

5.1.4 Risk management strategy

5.1.4.1 All pupils are reminded to wash their hands before and after eating

5.1.4.2 In primary schools, pupils have their own named water bottles

5.1.4.3 Should a pupil attend the school with an airborne allergy, the academy will attend a strategy meeting to put reasonable measures in place to minimise exposure to that allergen

5.1.4.4 Staff planning extracurricular activities such as trips, clubs, residentials or similar, must consider exposure to allergens. This extends to activities which would take place in craft, science, music, cooking activities, or activities including animals.

5.1.4.5 Specific risk assessments to manage the risks of exposure will be created when planning some of these activities, for example, for external visits or trips.

6. Individual Healthcare Plans (IHCPs)

6.1 Certain children at the academy will be subject to an IHCP. This will include:

6.1.1 If the child has an allergy which has a functional impact on them in school

6.1.2 They are at risk of harm as a results of their allergy

6.1.3 They require arrangements which are additional or different to those made generally

6.2 The IHCP will set out the arrangements put in place by the school to support the child with their medical condition or allergy, including in emergency situations.

6.3 The IHCP will also set out how children with allergies who require specific support with allergies will have them documented, recorded and shared.

6.4 Children whose allergies require flexibility or “reasonable adjustments” will have this recorded on their IHCP. The child’s required medication for their allergy management will also be recorded.

6.5 Where a child has an Allergy Action Plan and/or Asthma Action Plan issued by a Healthcare Professional, this should be attached to the IHCP. When an action plan is updated, the child’s IHCP should also be reviewed.

7. School wide policies

7.1 The academy maintains a register of pupils with AAIs. This includes:

7.1.1 Known allergens and risk factors for anaphylaxis

7.1.2 Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)

7.1.3 Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil

7.1.4 A photograph of each pupil to allow a visual check to be made with parental consent

7.1.5 The register is kept on a shared drive and can be checked quickly by any member of staff as part of initiating an emergency response

7.2 Pupils with AAIs will either retain ownership of this medication, or it will be stored within 5 minutes of their vicinity.

7.3 As part of the IHCP process, travel to and from the academy is taken into consideration. Arrangements detailing how the pupil will always no further than 5 minutes away from an AAI will be contained within the IHCP.

7.4 Allergic reaction procedures

7.4.1 All staff are trained in recognising the signs of an allergic reaction, including anaphylaxis, and how to respond.

7.4.2 Relevant staff have been trained in the administration of an AAI

7.4.3 If a pupil has an allergic reaction, the staff member will follow the pupil's allergy action plan

7.4.4 If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one

7.4.5 At all times, staff will consult the child's IHCP which will contain details of how to respond

7.4.6 If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance

7.4.7 If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed

7.5 Adrenaline auto-injectors (AAI)

7.5.1 The welfare lead is responsible for buying AAIs and ensuring they are stored according to relevant guidance

7.5.2 Spare AAIs will be kept in the first aid room

7.5.3 Spare AAIs will be sourced from Eureka First Aid (First Aid | Hygiene & Safety | Eureka Direct)

7.5.4 The welfare lead will make sure that:

7.5.4.1 AAIs and spare inhalers are stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

7.5.4.2 Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children

7.5.4.3 Not locked away, but accessible and available for use at all times

7.5.4.4 Not located more than 5 minutes away from where they may be needed

7.5.4.5 Spare AAIs and spare inhalers will be kept separate from any pupil's own, and clearly labelled to avoid confusion

7.6 AAIs can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions in a sharp bin and collected by our sanitaryware provider

8. Visits and trips

8.1 Having an allergy, medical need or anaphylaxis is not considered a reason not to attend a school visit or trip

8.2 The academy is committed to including pupils with allergies in all areas of school life, including visits and trips

8.3 Should a child seek to attend a trip without their medication, the academy reserves the right to rescind a child's attendance to the trip

8.4 Risk assessments for visits and trips will include strategies for pupils with allergies to safely attend. Strategies could include:

- 8.4.1 Adjustments to travel arrangements and/or seating plans
- 8.4.2 Allowing the pupil to carry their own AAI during the visit or trip
- 8.4.3 Restricting different allergens on the visit/trip
- 8.4.4 Staff training on allergy safety, including emergency procedures, before the trip
- 8.4.5 Ensuring the school takes spare AAIs on school trips and visits

9. Policy details

9.1 This policy will be available to view on our website.

9.2 This policy will be reviewed by the Trust Safeguarding Lead annually.

9.3 This policy links to:

- 9.3.1 Supporting students with medical conditions
- 9.3.2 First aid policy
- 9.3.3 Child protection and safeguarding policy
- 9.3.4 Trips and visits policy
- 9.3.5 Health and safety policy