



Transforming Lives
EDUCATIONAL TRUST

Allergy Safety Policy

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1 – The TLET Way

Transforming Lives Educational Trust (TLET/The Trust) is a family of academies. Every TLET policy is rooted in and reflects our ambitions for pupils, students and wider stakeholders alike.

OUR AMBITIONS -

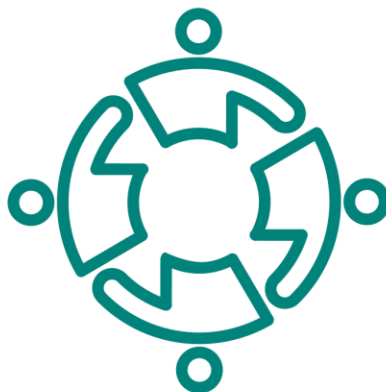
As a Trust family, our shared ambitions drive everything we do, we call this ‘The TLET Way’.

Through the transformative values of courage, kindness and loyalty, together we:



NURTURE POTENTIAL

We flourish in the places we create together.



INSPIRE COMMUNITY

We champion each other to make a difference.



DELIVER EXCELLENCE

We strive to achieve our best.



2 – Definition of Terms

- 2.1 Allergy – a condition in which the body has an exaggerated response to a substance (e.g. food or drug) also known as hypersensitivity.

Allergen – a normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.

Anaphylaxis / Anaphylactic Shock – is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites or medicines.

Epipen – Brand name syringe style device containing the drug Adrenalin, which is ready for immediate inter-muscular administration.

3 – Rationale and Statutory Requirements

- 3.1 This policy is based on the Department for Education's (DfE)'s guidance on [allergies 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:

- [The Food Information Regulations 2014](#)
- [The Food Information \(Amendment\) \(England\) Regulations 2019](#)

4 – Scope

This policy refers to;

Parents/Carers	✓	Trustees	✓
Employees	✓	Volunteers	✓
Pupils/Students	✓	Visitors	✓
Governors	✓	Community	

4.1 Roles & Responsibilities

We take a whole-school approach to allergy awareness.

4.1.1 Allergy lead

The nominated allergy lead is [insert staff member's name here. This should be a member of the senior leadership team (SLT) who has pastoral/welfare responsibilities].

They're responsible for:

- Promoting and maintaining allergy awareness across our school community

Recording and collating allergy and special dietary information for all relevant pupils (although the allergy lead has ultimate responsibility, the information collection itself may be delegated to the medical officer / the school nurse / administrative staff)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff

- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy 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

Keeping stock of the school's adrenaline auto-injectors (AAIs)

4.1.2 School first aider

The school first aider is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the allergy lead

4.1.3 Teaching and support staff

All teaching and support staff are responsible for:

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

4.1.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy 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
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
 - Following the school's guidance on food brought in to be shared
 - Updating the school on any changes to their child's condition

4.1.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

4.1.6 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.

5 – Principles

5.1 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.

5.2 Managing Risk

5.2.1 Hygiene procedures (adapt to your setting)

- Pupils are reminded to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2.2. Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents/carers to view with ingredients clearly labelled
- Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils
- 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)
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

5.2.3 Food restrictions

Set out your school's procedure on allowing food being brought in. It's almost impossible to ban all allergens (for example, milk and egg), so think carefully about whether you want to put restrictions in place.

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated.

5.2.4 Insect bites/stings

Insert procedures for preventing and dealing with insect bites/sting. For example:

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

5.2.5 Animals

Insert hygiene procedures for managing allergies to animals such as dogs, if relevant for your school context. For example:

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will not interact with animals

5.2.6 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their [class teacher/form tutor/etc.]

5.2.7 Events and school trips

- For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training
- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips

6 – Training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAI are kept on the school site, and how to access them
- How to administer AAI
- The wellbeing and inclusion implications of allergies

Training will be carried out annually by the allergy lead.

7 – Procedures for handling an allergic reaction

7.1 Register of pupils with AAI

- The school maintains a register of pupils who have been prescribed AAI or where a doctor has provided a written plan recommending AAI to be used in the event of anaphylaxis. The register includes:
 - Known allergens and risk factors for anaphylaxis
 - Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)

- 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
- A photograph of each pupil to allow a visual check to be made (this will require parental consent)
- The register is kept [in an easily accessible location / in every classroom] and can be checked quickly by any member of staff as part of initiating an emergency response

7.2 Allergic reaction procedures

- As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately
- Staff are trained in the administration of AAIs to minimise delays in pupil's receiving adrenaline in an emergency
- If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan
 - 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
- If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures [insert your procedures here – you can use the NHS advice on [treatment of anaphylaxis](#) and Anaphylaxis UK's advice on [what to do in an emergency](#) to formulate your response]
- A school AAI device will be used instead of the pupil's own AAI device if:
 - Medical authorisation and written parental consent have been provided, or
 - The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)
- 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
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed

8- Adrenaline auto-injectors (AAIs)

8.1 Purchasing of spare AAIs

The allergy lead is responsible for buying AAIs and ensuring they are stored according to the guidance.

Insert procedures for buying spare AAIs. For example:

- Where the AAIs will be sourced (i.e. a local pharmacy)
- The quantity of AAIs required
- Which brand(s) of AAI 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 guidance](#))

(See pages 11 and 12 of the guidance.)

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- 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
- **Not** locked away, but accessible and available for use at all times
- **Not** located more than 5 minutes away from where they may be needed (larger schools will require more than one AAI kit, ideally located near the dining area and playground)

Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

78.3 Maintenance (of spare AAI's)

[Insert name of 2 staff members] are responsible for checking monthly that:

- The AAI's are present and in date
- Replacement AAI's are obtained when the expiry date is near

8.4 Disposal

AAI's can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions in a sharps bin, collected by an authorised company.

8.5 Use of AAI's off school premises

- Pupils at risk of anaphylaxis who are able to administer their own AAI's should carry their own AAI with them on school trips and off-site events
- Insert your arrangements for taking spare AAI's for emergency use on school trips and off-site events

8.6 Emergency anaphylaxis kit

Insert the following text if relevant (it's good practice for schools to hold spare AAI's as part of an emergency anaphylaxis kit).

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAI's
- Instructions for the use of AAI's
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils to whom the AAI can be administered
- A record of when AAI's have been administered

8 – Monitoring

8.1 It is the responsibility of the Board of Trustees, and those they delegate authority, to ensure that the principles and procedures of this policy are adhered to. The use of this policy will be subject to routine monitoring to ensure its fidelity in practice. The evidence gathered from monitoring at regular intervals shall inform any reviews and future revisions to the policy, and no later than that stated on Page 1 of this policy.

9 – Related Documents

9.1 This policy is linked to the following policies

- TLET Health and Safety Policy
- TLET Supporting pupils with medical conditions policy