



Gateway Primary School Policy Cover Sheet

Policy Name:	Allergy Safety Policy
Adopted at / by:	FGB
Signed on behalf of the Governing Board	
Name:	Kevin Moyes
Date:	October 2026
Signed on behalf of Headteacher:	pp. 
Name:	Kayleigh Anstee
Date:	October 2026
Review period:	1 year
Date of next Review	October 2027

1. Introduction

Gateway Primary School is committed to ensuring that children with allergies are able to attend school safely, confidently and fully participate in school life alongside their peers.

The school recognises that allergies can have a significant impact on a child's health, wellbeing, attendance, confidence and participation. In some circumstances, exposure to an allergen can result in a severe and potentially life-threatening allergic reaction known as anaphylaxis.

This policy sets out the arrangements Gateway Primary School has in place to identify children and adults with allergies, minimise the risk of exposure to known allergens, respond appropriately to allergic reactions and support the wellbeing and inclusion of children with allergies.

This policy should be read alongside the school's:

- First Aid
- Supporting Pupils with Medical Conditions arrangements
- Educational Visits Policy
- Food safety policy and procedure
- Children with health needs who cannot attend school Policy
- Communication Policy
- Health and Safety Policy
- Data Protection Policy
- Staff Code of Conduct

This policy has been developed with regard to the Department for Education's **Allergy safety in schools statutory guidance**, published July 2026.

2. Culture

2.1 Allergy awareness

Gateway Primary School will promote a culture in which allergies are understood, taken seriously and managed sensitively.

All staff have a responsibility to understand that an allergic reaction can occur quickly and that anaphylaxis is a medical emergency requiring an immediate response.

The school will ensure that allergy safety is considered part of everyday school practice rather than being the responsibility of individual children or their families alone.

The school will seek to ensure that children with allergies:

- feel safe and included;
- are able to participate fully in lessons, play, clubs, trips and wider school activities;
- are not unnecessarily singled out because of their allergy;
- understand, at an age-appropriate level, how to keep themselves safe;
- know which trusted adults they can approach if they feel unwell or are concerned about exposure to an allergen.

2.2 Staff training

All staff who are present when pupils are on site will receive allergy awareness and emergency response training at least annually.

This includes, where applicable:

- teachers;
- teaching assistants;
- administrative staff;
- lunchtime staff;
- wraparound care staff;
- breakfast and after-school club staff;
- catering staff;
- supply and agency staff;
- peripatetic staff;
- regular volunteers.

Contractors who have no pupil-facing role are not normally required to undertake the school's allergy awareness training.

Training will ensure that staff:

- understand what an allergy is and the risks it presents;
- understand the difference between food allergy, food intolerance and coeliac disease;
- understand that allergies may include food, medication, insect, contact and airborne allergens;
- know where information about individual children's allergies can be found;
- recognise the signs and symptoms of an allergic reaction;
- can recognise anaphylaxis;
- know how to respond to an allergic reaction;
- know how and when to call emergency services;
- know how to locate and administer adrenaline;
- understand how to use different adrenaline auto-injector devices;
- understand the use of the school's spare emergency adrenaline devices;
- understand their role in reducing the risk of exposure;
- understand the school's Allergy Safety Policy;
- understand how to report an allergic reaction, anaphylactic episode or near miss.

New staff will receive allergy safety information as part of their induction.

The school will have arrangements to ensure that supply and temporary staff receive appropriate information about pupils with significant allergies and the school's emergency procedures.

Training records will be maintained by the school.

3. Wellbeing and inclusion

Gateway Primary School recognises that living with an allergy can cause anxiety for children and their families.

The school will seek to support children with allergies in a way that promotes confidence, independence and inclusion.

Staff will avoid unnecessarily drawing attention to a child's allergy or medication. Information will be shared on a need-to-know basis while ensuring that adults responsible for the child's care have the information necessary to keep them safe.

Children with allergies will not routinely be excluded from activities because of their allergy. Where an activity presents a potential risk, the school will consider reasonable adjustments and appropriate risk-management measures so that the child can participate safely.

Bullying and peer relationships

Allergy-related teasing, bullying, intimidation or deliberate exposure to an allergen will not be tolerated.

Any concerns will be addressed in accordance with the school's Communication Policies.

Where appropriate, children may be supported to help trusted peers understand how to seek adult help in an emergency. This will only be undertaken following discussion with the child and their parents/carers and will be handled sensitively.

4. Minimising risk

Gateway Primary School will take reasonable steps to minimise the risk of children, staff and visitors coming into contact with known allergens.

The school recognises that it is not possible to guarantee an allergen-free environment and therefore focuses on appropriate risk reduction, awareness and rapid emergency response.

4.1 Food provided by school

Where food is provided by the school's catering arrangements:

- information about allergens in food will be available;
- catering staff will be informed of children with identified food allergies;
- reasonable measures will be taken to prevent exposure to known allergens;
- changes to menus or ingredients will be communicated appropriately;
- children with food allergies will be provided with safe alternatives where required;
- staff supervising children at mealtimes will understand relevant allergy arrangements.

Parents/carers will be asked to provide up-to-date information about their child's allergies and any changes to dietary requirements.

The school will liaise with its catering provider to ensure that appropriate allergen information and procedures are maintained.

4.2 Food brought into school

The school recognises that food may be brought into school by children, parents/carers and staff.

Parents/carers will be asked to provide accurate information regarding food allergies and to follow school arrangements concerning food brought into school.

Where a child has a severe allergy, the school may introduce specific reasonable measures to reduce the likelihood of exposure to their known allergen.

The school will avoid unnecessary blanket restrictions where these are not proportionate, while recognising that individual circumstances may require additional measures.

4.3 Classroom and curriculum activities

Teachers and other staff planning activities will consider whether there is a risk of allergen exposure.

This includes, where relevant:

- cooking and food technology;
- science;
- art and craft;
- use of natural materials;
- musical activities;
- gardening;
- animal-related activities;
- outdoor learning;
- special events and celebrations.

Where a known allergen is required for an activity, staff will consider whether an alternative material or ingredient can be used.

Where this is not possible, appropriate measures will be identified through the child's Individual Healthcare Plan and/or a specific risk assessment.

4.4 Contact and airborne allergens

Where a child has a known contact or airborne allergy, the school will consider reasonable measures to reduce the likelihood of exposure.

These measures will be proportionate to the identified risk and may include:

- avoiding particular materials;
- changing the location of an activity;
- additional cleaning;
- avoiding specific products;
- ensuring appropriate supervision;
- providing an alternative activity where necessary.

5. Individual children with allergies

5.1 Identification

The school will maintain an accurate record of children with known allergies.

Information will be obtained:

- when children join Gateway Primary School;
- through admissions and registration information;
- from parents/carers;
- from previous schools or settings where appropriate;
- from healthcare professionals where relevant;
- when a new allergy is identified.

As Gateway Primary School has a high level of pupil mobility, including children joining the school from other areas of the UK and overseas, allergy information will be checked carefully when children join the school.

Parents/carers are responsible for informing the school promptly of any new diagnosis, change in allergy or change to prescribed medication.

The school's allergy record will identify, where relevant:

- the child's name;
- known allergen(s);
- signs and symptoms;
- whether the child has an Individual Healthcare Plan;
- whether an Allergy Action Plan has been provided;
- whether the child has prescribed adrenaline auto-injectors;
- the location of the child's prescribed medication;
- any additional arrangements required.

6. Individual Healthcare Plans

A child should have an Individual Healthcare Plan (IHP) where:

- their allergy has a functional impact on them in school;
- they are at risk of harm as a result of their allergy; and
- they require arrangements that are additional to or different from the school's general arrangements.

An IHP will set out the additional arrangements required to support the individual child, including arrangements for emergency situations.

Where a healthcare professional has provided an Allergy Action Plan or Asthma Action Plan, this will be attached to or referenced within the IHP.

IHPs will be developed in partnership with:

- the child, where appropriate;
- parents/carers;
- relevant school staff;
- healthcare professionals, where appropriate.

IHPs will be reviewed:

- when there is a significant change in the child's circumstances;
- following an allergic reaction or serious near miss;
- when a new or updated Allergy Action Plan is provided;
- at least annually, where appropriate.

7. Prescribed adrenaline auto-injectors

Children who have been prescribed adrenaline auto-injectors (AAIs) must have rapid access to their medication at all times.

This includes:

- classrooms;
- the playground;
- sports areas;
- The Hangar;
- The Mess/wraparound provision;
- school events;
- educational visits;
- residential visits;
- other off-site activities.

In the event of anaphylaxis, adrenaline should be administered as soon as possible and within five minutes.

Children prescribed AAI should have their prescribed devices available in school in accordance with their individual arrangements.

Parents/carers are responsible for ensuring that prescribed medication supplied to school is:

- in date;
- correctly labelled;
- appropriate for the child;
- replaced before it expires;
- collected when requested by the school.

The school will maintain a record of children who have prescribed AAI and the location of their medication.

At the end of each school day, arrangements will be made for prescribed medication to be taken home where this is required and agreed with parents/carers.

8. Spare emergency adrenaline auto-injectors

Gateway Primary School will maintain spare emergency adrenaline auto-injectors in accordance with statutory requirements and DfE guidance.

Spare AAI are **additional to** a child's own prescribed medication and must not be considered a replacement for prescribed devices.

8.1 Location

The school's spare emergency AAI will be stored at:

Primary emergency AAI location: School Office

The school will ensure that a pair of spare AAI can be brought to a child experiencing anaphylaxis within five minutes.

Given the size and layout of the school site, the school will review whether more than one emergency kit is required.

8.2 Storage

Spare AAI's will:

- be stored in pairs;
- be clearly labelled as emergency/spare devices;
- be readily accessible;
- not be locked away;
- be stored in accordance with the manufacturer's instructions;
- be protected from inappropriate access by children while remaining immediately accessible to trained staff.

The emergency kit may also contain other emergency medication and equipment where appropriate, clearly labelled and maintained in accordance with the school's relevant policies.

8.3 Checking and replacement

The designated member of staff will check spare AAI's regularly to ensure:

- they remain in date;
- they are stored correctly;
- packaging is intact;
- the correct dosage is available;
- the devices are present and accessible.

Checks will be recorded.

Spare AAI's will be replaced following use or before expiry.

Used or expired AAI's will be disposed of safely in accordance with appropriate arrangements.

9. Responding to an allergic reaction or anaphylaxis

All staff must treat suspected anaphylaxis as a medical emergency.

Where a child is experiencing symptoms consistent with anaphylaxis:

1. **Stay with the child.**
2. **Administer adrenaline immediately** using the child's prescribed AAI where available, or the school's spare emergency AAI where appropriate.
3. **Call 999** and state that the child is experiencing anaphylaxis.
4. Follow the child's Allergy Action Plan/IHP where available.
5. Inform the child's parent/carer.
6. If there is no improvement after five minutes and a second AAI is available, administer the second dose in accordance with emergency guidance.
7. Ensure the child receives emergency medical attention.
8. Record the incident.
9. Inform the Headteacher/Allergy Lead.
10. Review the circumstances following the incident and identify any learning or changes required.

Staff should not delay administration of adrenaline while attempting to establish the exact cause of the reaction.

A child who has received adrenaline following suspected anaphylaxis must receive emergency medical assessment.

10. Visits, trips and residential activities

Children with allergies must be able to participate in educational visits, trips, residential activities and wider school experiences.

Where a child is at risk of anaphylaxis, the visit risk assessment will consider:

- the child's known allergens;
- access to prescribed medication;
- access to spare emergency AAls where appropriate;
- staff trained to respond to anaphylaxis;
- catering and food arrangements;
- emergency medical provision;
- the location and accessibility of medication;
- communication arrangements with parents/carers;
- the nature and location of the activity.

Children at risk of anaphylaxis will have their own prescribed adrenaline devices with them on visits and trips.

Staff responsible for the child will know where the medication is located and how to access it quickly.

For residential visits, allergy arrangements will form part of the individual child's pre-visit planning and risk assessment.

11. The Hangar and additional provision

Children accessing The Hangar or other additional provision within school remain subject to the same allergy safety arrangements as all other children.

Relevant staff will have access to:

- current allergy information;
- Individual Healthcare Plans;
- Allergy Action Plans;
- prescribed medication;
- emergency procedures.

Where children move between classrooms, The Hangar and other areas of the school, arrangements will ensure that staff supervising them know how to access their medication quickly.

12. The Mess and wraparound provision

Allergy safety arrangements apply throughout the school day, including breakfast and after-school provision operated by or on behalf of the school.

The Mess/wraparound staff will have access to relevant allergy information and will receive appropriate allergy awareness and emergency response training.

Children's prescribed medication must remain accessible during wraparound provision.

Where food is provided, appropriate allergen information and safe food-handling arrangements will apply.

Parents/carers will be informed of any specific arrangements they need to follow for their child's allergy during wraparound provision.

13. Serious incidents and near misses

Gateway Primary School will record, respond to and learn from serious allergy incidents and near misses.

A near miss may include, for example:

- a child coming into contact with a known allergen but not developing symptoms;
- an incorrect food being provided but identified before consumption;
- a prescribed or emergency AAI being unavailable when required;
- a significant delay in accessing medication;
- an allergen being present where it should reasonably have been identified.

Allergic reactions and near misses should be reported to the Headteacher/Allergy Lead and shared on the Medical Shared Drive.

Following a significant incident or near miss, the school will consider:

- what happened;
- whether the existing risk assessment was appropriate;
- whether staff followed the policy;
- whether communication was effective;
- whether medication was accessible;
- whether training was sufficient;
- whether changes are required to the child's IHP;
- whether wider school procedures need to be amended.

Parents/carers will be informed appropriately.

The incident will be recorded in accordance with the school's medical conditions and safeguarding/incident recording procedures.

Where appropriate, the Governing Body will be informed of significant incidents and resulting actions.

14. Information sharing

Information about children's allergies is sensitive health information and will be managed respectfully and securely.

Information will be shared with staff who require it in order to keep a child safe.

This may include:

- class teachers;
- teaching assistants;
- lunchtime staff;
- wraparound staff;
- catering staff;
- staff leading educational visits;
- relevant senior leaders;
- first aiders and other staff responsible for emergency response.

The school will avoid unnecessary public disclosure of children's medical information.

Information will be updated when a child's allergy, medication or individual arrangements change.

Where a child transfers to another school, relevant allergy information will be shared appropriately to support continuity of care.

15. Awareness of the policy

This policy will be:

- published on the Gateway Primary School website;
- available to parents/carers;
- available in hard copy on request;
- shared with staff;
- included within relevant staff induction arrangements;
- referred to as part of annual allergy awareness training.

Children will receive age-appropriate support to understand allergy safety and how to seek help in an emergency.

16. Roles and responsibilities

Governing Body

The Governing Body will:

- ensure the school has an Allergy Safety Policy;
- ensure the policy is reviewed at least annually;
- ensure the policy is published and accessible;
- monitor the school's arrangements for supporting children with allergies;
- ensure appropriate resources are available.

Headteacher / Allergy Lead

The Headteacher/Allergy Lead will:

- lead implementation of this policy;
- maintain oversight of allergy arrangements;
- ensure staff training is undertaken;

- ensure appropriate records are maintained;
- oversee the school's spare AAI arrangements;
- ensure incidents and near misses are reviewed;
- liaise with parents/carers and relevant professionals;
- ensure the policy is reviewed annually or following significant incidents.

All staff

All staff are responsible for:

- understanding the school's Allergy Safety Policy;
- completing required allergy awareness training;
- familiarising themselves with relevant children's allergy information;
- taking reasonable steps to minimise exposure to known allergens;
- responding promptly to suspected allergic reactions;
- knowing how to access emergency medication;
- reporting incidents and near misses.

Parents and carers

Parents/carers are responsible for:

- providing accurate and up-to-date information about their child's allergies;
- informing the school of changes to their child's condition;
- providing prescribed medication where required;
- ensuring medication remains in date;
- providing updated Allergy Action Plans where issued;
- working with the school to develop and review IHPs.

Children

Children will be supported, at an age-appropriate level, to:

- understand their allergy;
- recognise when they may need help;
- know which adults they can approach;
- develop increasing independence in managing their condition where appropriate.

Children will never be expected to take sole responsibility for their own safety.

17. Monitoring and review

This policy will be reviewed at least annually.

The review will consider:

- allergic reactions;
- anaphylaxis incidents;
- near misses;
- medication issues;
- staff training;
- changes in the school's pupil population;
- changes to individual healthcare plans;

- changes in legislation or statutory guidance;
- feedback from children, parents/carers and staff.

The policy may be reviewed earlier where an incident or near miss identifies a significant weakness in existing arrangements.

The Governing Body will approve the policy following review.

Appendix 1 – Allergy Safety Checklist

The school will maintain an annual allergy safety checklist confirming that:

- ☐ All pupils with known allergies are identified on the school's records.
- ☐ Relevant pupils have current Individual Healthcare Plans where required.
- ☐ Allergy Action Plans are current and accessible.
- ☐ Prescribed AAIs are in date and accessible.
- ☐ Spare emergency AAIs are available in pairs.
- ☐ Spare AAIs are stored in appropriate accessible locations.
- ☐ Spare AAIs are within five minutes of all areas in which pupils may be present.
- ☐ Emergency medication checks are recorded.
- ☐ All relevant staff have completed annual allergy awareness training.
- ☐ New staff have received allergy safety information as part of induction.
- ☐ Supply and temporary staff have arrangements for accessing relevant information.
- ☐ Catering arrangements have been reviewed.
- ☐ Wraparound provision has appropriate allergy arrangements.
- ☐ Educational visits risk assessments consider allergy.
- ☐ Serious incidents and near misses have been recorded and reviewed.
- ☐ Parents/carers have been informed of relevant arrangements.
- ☐ The Allergy Safety Policy is published on the school website.
- ☐ The policy has been reviewed within the last 12 months.

Appendix 2 – Emergency Response

Suspected anaphylaxis

ACT IMMEDIATELY

1. GIVE ADRENALINE

Use the child's prescribed AAI where available or the school's spare emergency AAI where appropriate.

2. CALL 999

State clearly that the child is experiencing **anaphylaxis**.

3. STAY WITH THE CHILD

Do not leave the child alone.

4. SECOND DOSE

If there is no improvement after five minutes and a second AAI is available, administer it in accordance with emergency guidance.

5. INFORM PARENTS/CARERS

Parents/carers should be contacted as soon as practicable.

6. RECORD AND REVIEW

The incident must be recorded and reviewed by the Headteacher/Allergy Lead.

Appendix 3 – Key School-Specific Information

Named Allergy Lead:

Sarah Gardner

Primary emergency AAI location:

School Office

Secondary emergency AAI location:

Kitchen Area

Location of allergy records:

PPA office noticeboard

Location of IHPs:

PPA office noticeboard

Catering provider/contact:

Carterton Community College

Emergency medication checking responsibility:

Gill Lock – School Business Manager

Date of annual AAI stock check:

10/9/26

Date of annual allergy training:

1/9/26

Date policy reviewed:

September 2026

Date policy approved by Governors:

October 2026