



THE
MALLING
SCHOOL

Policy For	Allergy Safety Policy
Person Responsible	Business Manager
Date Introduced	September 2026
Review Date	September 2027
Next review Date	September 2027
Approved By	Governing Board

1. Policy statement

The Malling School is committed to providing a safe, inclusive and supportive environment for all pupils with allergies.

The school recognises that allergies are medical conditions that can have a significant impact on a young person's health, wellbeing, attendance, participation and safety. Anaphylaxis is a potentially life-threatening allergic reaction and must be treated as a medical emergency.

The school will take reasonable and proportionate steps to:

- identify pupils with allergies;
- reduce the risk of exposure to known allergens;
- ensure appropriate emergency arrangements are in place;
- ensure staff have appropriate allergy awareness and emergency response training;
- support pupils to manage their allergy with increasing independence as appropriate;
- provide appropriate Individual Healthcare Plans (IHPs);
- ensure pupils with allergies can participate fully in school life;
- support pupils' wellbeing and prevent allergy-related bullying;
- learn from allergic reactions and near misses.

This policy applies from **1 September 2026** and has been developed with regard to the Department for Education's statutory guidance *Allergy safety in schools*.

2. Legislative and guidance framework

This policy has been developed regarding:

- **Children's Wellbeing and Schools Act 2026**, particularly section 34;
- **Children and Families Act 2014**, section 100;
- DfE *Allergy safety in schools: statutory guidance*;
- DfE *Supporting pupils with medical conditions at school*;
- **Equality Act 2010**;
- **Education Act 2002**;
- **Health and Safety at Work etc. Act 1974**;
- **SEND Code of Practice: 0 to 25 years**;
- **Keeping Children Safe in Education 2026**;
- Food Information Regulations 2014;
- relevant Food Standards Agency guidance;
- relevant Department of Health and Social Care guidance on adrenaline devices;
- relevant NHS and specialist allergy guidance.

The DfE statutory guidance is issued under section 100 of the Children and Families Act 2014, as amended by section 34 of the Children's Wellbeing and Schools Act 2026. The governing body of a maintained school must have regard to the guidance. ([GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/Allergy_safety_guidance_for_schools.pdf))

3. Scope

This policy applies to:

- all pupils;
- teaching staff;
- support staff;
- supply and agency staff;
- trainee teachers;
- volunteers;
- contractors where relevant;
- catering staff;
- staff supervising extracurricular activities;
- educational visits and residential trips;
- breakfast and after-school provision;
- food provided or sold by the school.

The policy covers allergies including, but not limited to:

- food allergies;
- allergies to insect stings;
- medication allergies;
- contact allergies;
- airborne allergens;
- allergies associated with asthma;
- allergies associated with eczema and hay fever.

4. Governing body responsibilities

The governing body will:

- ensure that an allergy safety policy is in place;
- ensure the policy is published on the school's website;
- have regard to the DfE statutory guidance;
- ensure the policy is reviewed at least annually;
- ensure appropriate resources are available;
- monitor the effectiveness of allergy safety arrangements;
- receive appropriate information about serious incidents and near misses;
- ensure lessons learned from incidents inform future practice.

The school's allergy risks will be included within the school's wider risk management arrangements and risk register where appropriate.

5. Headteacher responsibilities

The Headteacher has overall responsibility for ensuring that this policy is implemented effectively.

The Headteacher will ensure that:

- a named senior leader is responsible for allergy safety;
- staff receive appropriate training;
- pupils with allergies are identified;
- appropriate IHPs are in place;
- emergency medication is accessible;
- catering arrangements appropriately manage allergen risks;
- school trips and activities take account of allergies;
- incidents and near misses are recorded and reviewed;
- parents/carers are appropriately informed;
- the policy is reviewed annually.

6. Designated Allergy Lead

Designated Allergy Lead: Business Manager and member of the senior leadership team.

The Allergy Lead will:

- coordinate the implementation of this policy;
- maintain the school's allergy register;
- coordinate IHPs and Allergy Action Plans;
- liaise with pupils, parents/carers and healthcare professionals;
- coordinate staff allergy awareness training;
- oversee emergency medication arrangements;
- monitor spare adrenaline devices;
- ensure relevant staff can access allergy information;
- monitor incidents and near misses;
- coordinate annual policy review;
- ensure appropriate information is communicated to staff.

The Allergy Lead will work closely with the SENCO, DSL, first-aid lead, school first aiders, pastoral team, and catering provider as appropriate.

7. Identification of pupils with allergies

The school will seek to identify pupils with allergies:

- during admission and transition;
- through information provided by parents/carers;
- through information transferred from primary schools;

- through healthcare professionals;
- when a new allergy is diagnosed;
- when a suspected allergy is reported;
- following an allergic reaction or near miss.

The school will maintain an appropriate record containing relevant information about pupils with known allergies.

IHPs and relevant allergy information will be accessible to staff who need the information to keep the pupil safe, while maintaining appropriate confidentiality and data protection controls.

Medical information will be handled in accordance with the school's data protection arrangements.

8. Secondary-age pupil independence

The school recognises that secondary pupils should be supported to develop increasing independence in managing their allergy.

Where appropriate, pupils will be encouraged and supported to:

- understand their allergy;
- recognise their own symptoms;
- understand their known triggers;
- know what to do if exposed to an allergen;
- carry their prescribed medication;
- carry their adrenaline devices;
- tell an adult when they feel unwell;
- understand when emergency medication is required;
- participate in decisions about their IHP;
- develop confidence in managing their allergy.

However, the school will **not assume that a secondary-age pupil can safely self-manage solely because of their age.**

Decisions about self-management will consider:

- the pupil's age and maturity;
- understanding of their condition;
- medical advice;
- severity of allergy;
- previous reactions;
- ability to recognise symptoms;
- safeguarding considerations;
- the pupil's wishes;
- parents'/carers' views.

9. Individual Healthcare Plans

A pupil will have an Individual Healthcare Plan (IHP) where their allergy requires the school to put in place supportive arrangements that are additional to or different from those generally available. This may apply where the allergy has a functional impact at school or places the pupil at risk of harm. An IHP may also be appropriate where an allergy is suspected or under investigation and specific supportive arrangements are required.

The IHP will contain the information required by the DfE Individual Healthcare Plan template, proportionate to the pupil's circumstances and level of support required.

- allergy diagnosis;
- known allergens;
- symptoms;
- emergency response;
- prescribed medication;
- adrenaline device arrangements;
- location of medication;
- self-management arrangements;
- supervision requirements;
- food arrangements;
- PE and practical subject arrangements;
- educational visits;
- residential visits;
- emergency contact details;
- review arrangements.

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

10. Allergy awareness training

The school will provide allergy awareness and emergency response training to staff.

Training will cover:

- the nature and risks of allergy;
- common allergens;
- food allergy;
- asthma and its relationship with allergy;
- eczema and hay fever;
- food allergy, intolerance and coeliac disease;
- signs and symptoms of an allergic reaction;
- recognition of anaphylaxis;
- use of adrenaline devices;
- location of emergency medication;

- individual pupil arrangements;
- reducing exposure to known allergens;
- emergency response;
- incident and near-miss reporting;
- pupil wellbeing;
- allergy-related bullying;
- the school's allergy safety policy.

First-aid training alone will **not** be regarded as sufficient allergy training.

All staff who are present during times when pupils are scheduled to be on site will receive allergy awareness and emergency response training at least annually. This includes permanent, temporary, supply, agency and peripatetic staff, regular volunteers, catering staff and staff involved in breakfast and after-school provision.

New staff will receive allergy awareness and emergency response information as part of induction and before undertaking unsupervised pupil-facing duties. Training will thereafter be refreshed at least annually.

11. Supply, agency and temporary staff

The school will ensure that appropriate arrangements are in place so that supply, agency and temporary staff have access to relevant allergy information and understand the emergency arrangements.

The school will ensure that supply, agency, temporary and peripatetic staff receive appropriate allergy awareness and emergency response training and have access to relevant allergy information before undertaking pupil-facing duties.

12. Reducing allergen exposure

The school will take reasonable steps to reduce the risk of pupils coming into contact with known allergens.

Measures may include:

- appropriate cleaning;
- handwashing;
- preventing food sharing;
- appropriate food storage;
- safe food preparation;
- allergen information;
- communication with catering providers;
- risk assessment of practical activities;
- consideration of allergens in science, food technology, art and design technology;
- consideration of environmental allergens;
- appropriate arrangements for school events;

- appropriate arrangements for educational visits.

The school will avoid unnecessary restrictions on pupils with allergies.

13. Food allergy and catering

The school will work with its catering provider to ensure that food allergies are appropriately managed.

The school will ensure that:

- allergen information is available;
- menus are checked;
- ingredient substitutions are identified;
- catering staff understand individual dietary requirements;
- appropriate controls are used to reduce cross-contact;
- changes to ingredients are communicated;
- food provided at school events is appropriately managed.

Pupils with food allergies will not routinely be segregated from their peers at mealtimes because of their allergy.

The school will comply with applicable food information legislation.

14. Food brought into school

The school recognises that secondary pupils may bring food and drinks into school.

The school will:

- have clear expectations that pupils must not trade or share food, food utensils or food containers.
- educate pupils about the risks of sharing food with someone who has an allergy;
- communicate appropriate expectations to parents/carers;
- consider specific risks identified through individual risk assessments;
- take additional reasonable precautions for pupils with serious allergies.

The school will not automatically impose blanket bans on individual foods unless this is considered necessary and proportionate following assessment of the particular risk.

15. Prescribed adrenaline devices

Pupils who have been prescribed adrenaline devices should have their prescribed devices with them at school and have access to both devices at all times, in accordance with their healthcare professional's advice and their IHP.

The school will ensure that:

- prescribed medication remains readily accessible;
- the school will have arrangements for pupils to take their individually prescribed adrenaline devices home when appropriate, including at the end of the school day, and for ensuring that devices remain in date.
- staff know how to access relevant medication where necessary;
- expiry dates are monitored;
- parents/carers are contacted when replacement medication is required;
- medication is available during lessons, PE, practical subjects and activities;
- medication accompanies pupils on educational visits.

16. Spare adrenaline devices

The school will hold four pairs of spare adrenaline auto-injectors (AAIs) appropriate for pupils aged over six. The number and location of spare AAIs will be determined by the size and layout of the school so that adrenaline can be brought to a person experiencing anaphylaxis within five minutes. Spare AAIs will be readily accessible, not locked away, stored in pairs, clearly labelled as spare emergency devices and checked regularly for condition and expiry. Arrangements for the safe storage, use and disposal of spare AAIs are set out in the school's Medicines Policy/Medical Conditions Policy. Used or expired adrenaline auto-injectors will be disposed of safely in accordance with the school's medicines arrangements and applicable requirements for the disposal of medicines.

Spare devices will:

- be readily accessible;
- be clearly identified;
- be stored safely;
- be maintained and checked regularly;
- have their expiry dates monitored;
- be replaced following use or expiry;
- be available for appropriate use in an emergency;
- accompany pupils where required on educational visits.

The school will maintain appropriate records of checks and stock.

The school holds four pairs of spare **300 microgram adrenaline auto-injectors (AAIs)**, located in the Guidance Office, SRP, Sixth Form area and Reception. The Reception-based kit is available for use on the sports field and during educational visits. These locations have been selected to ensure that a pair of AAIs can be accessed and administered to any pupil experiencing suspected anaphylaxis within five minutes.

17. Emergency response – suspected anaphylaxis

Anaphylaxis is a medical emergency.

If a pupil is experiencing or is suspected of experiencing anaphylaxis, staff will:

1. Ensure the pupil is laid flat with their legs raised. They should not be allowed to stand or walk. Help and emergency medication must be brought to them rather than requiring the pupil to move.
2. Follow the pupil's Allergy Action Plan/IHP where available.
3. Administer adrenaline as soon as possible and within five minutes of suspected anaphylaxis. Do not wait for the emergency services to arrive before administering adrenaline. Use the pupil's prescribed adrenaline device where available.
4. Use a spare school adrenaline device where appropriate and permitted by current guidance.
5. Call **999 immediately**.
6. State that the pupil is experiencing anaphylaxis.
7. Monitor the pupil continuously.
8. If there is no improvement after 5 minutes, administer a further dose of adrenaline where appropriate.
9. Ensure the pupil is transferred to hospital.
10. Inform parents/carers as soon as practicable.
11. Record and investigate the incident.

Where a pupil with known asthma and food allergy suddenly develops breathing difficulty, staff will consider anaphylaxis and follow the pupil's emergency plan.

SUSPECT ANAPHYLAXIS → GIVE ADRENALINE → CALL 999 → DO NOT ALLOW THE PUPIL TO STAND/WALK → SECOND DOSE AFTER 5 MINUTES IF REQUIRED → HOSPITAL

18. Educational visits and residential trips

The school will enable pupils with allergies to participate in educational visits and residential experiences wherever reasonably possible.

Trip planning will include consideration of:

- the pupil's IHP;
- Allergy Action Plan;
- prescribed medication;
- spare emergency medication;
- staff awareness;
- catering;
- accommodation;
- transport;
- destination-specific allergens;
- access to emergency medical services.

A parent/carers will not be required to accompany a pupil solely because of their allergy where the school can reasonably provide appropriate support.

19. PE, practical subjects and extracurricular activities

Allergy arrangements will be considered for:

- PE;
- science;
- food technology;
- design technology;
- art;
- school productions;
- clubs;
- sports fixtures;
- Duke of Edinburgh activities;
- residential trips;
- work experience;
- enrichment activities.

Pupils will not be excluded from an activity solely because they have an allergy where reasonable arrangements can be made to manage the risk.

20. Wellbeing and mental health

The school recognises that living with a potentially life-threatening allergy can cause anxiety.

The school will:

- provide reassurance about safety arrangements;
- listen to pupil concerns;
- provide appropriate pastoral support;
- encourage age-appropriate independence;
- consider reasonable adjustments;
- monitor the impact of allergy on attendance and participation;
- involve parents/carers where appropriate;
- refer to appropriate pastoral or health services where necessary.

21. Allergy-related bullying

Allergy-related bullying will not be tolerated.

This includes:

- deliberately exposing someone to an allergen;
- threatening to expose someone to an allergen;
- deliberately sharing food containing a known allergen;
- threatening to force-feed an allergen;
- mocking a pupil because of their allergy;

- excluding a pupil from activities because of their allergy.

Such behaviour will be dealt with under the school's Behaviour, Anti-Bullying and Safeguarding procedures as appropriate.

22. Attendance and inclusion

The school will not routinely send pupils home or prevent them from attending normal school activities because they have an allergy.

Pupils with allergies will be supported to participate in:

- lessons;
- lunch;
- PE;
- clubs;
- trips;
- residential visits;
- examinations;
- school events;
- enrichment activities.

Reasonable adjustments will be considered where required under the Equality Act 2010.

23. Information sharing

Relevant allergy information will be shared with staff who need it to keep pupils safe.

Information may be shared with:

- teachers;
- teaching assistants;
- pastoral staff;
- first aiders;
- catering staff;
- trip leaders;
- extracurricular staff;
- supply staff;
- relevant healthcare professionals.

Information will be handled in accordance with data protection requirements.

24. Visitors and staff with allergies

The school will consider how staff and visitors with allergies can be identified and supported, particularly where food is provided.

The same general principles of risk reduction and emergency response will apply where appropriate.

25. Incidents and near misses

All serious allergic incidents and relevant near misses will be recorded as soon as practicable in the school's accident/incident recording system, investigated, and used to identify learning and corrective action. Records will include who was affected, what happened, when and where the incident occurred, the known or suspected cause, the response taken, whether emergency services were contacted, and the outcome.

Examples include:

- administration of adrenaline;
- exposure to a known allergen;
- incorrect food being supplied;
- cross-contact;
- failure to provide appropriate medication;
- medication being inaccessible;
- a significant delay in emergency response.

Following an incident or near miss, the school will:

- ensure appropriate medical care;
- inform parents/carers;
- record the incident;
- investigate what happened;
- identify contributing factors;
- review the pupil's IHP where appropriate;
- consider whether this policy or another procedure needs changing;
- implement corrective action;
- share relevant learning with staff.

The Allergy Lead/Headteacher will consider whether an incident requires notification or reporting to any external body, including the local authority/environmental health team, Health and Safety Executive under RIDDOR, healthcare professionals or safeguarding partners, as applicable.

26. Allergy safety drills

The school may conduct periodic allergy emergency drills or scenario-based training where this is considered appropriate and proportionate. A simulated anaphylaxis scenario may be used to test:

- staff response;
- access to medication;
- communication;

- emergency procedures;
- 999 arrangements;
- location of spare adrenaline devices.

Any drill will be carefully planned so that it does not cause unnecessary anxiety for pupils with allergies.

27. Complaints

The school's complaints procedure will allow parents/carers to raise concerns about allergy safety arrangements, including concerns following a serious incident or near miss.

Complaints will be investigated in accordance with the school's published complaints procedure.

28. Monitoring and review

The Allergy Lead will monitor:

- the allergy register;
- IHPs;
- Allergy Action Plans;
- staff training;
- supply/agency staff arrangements;
- prescribed medication;
- spare adrenaline devices;
- catering arrangements;
- educational visit arrangements;
- incidents;
- near misses;
- allergy-related bullying;
- pupil wellbeing.

The governing body will receive appropriate assurance about the implementation of this policy.

Where appropriate, the school will involve pupils with allergies and staff with allergies, together with parents/carers, in the development and review of allergy safety arrangements.

The policy will be reviewed at least annually and following any serious incident or significant near miss.

29. Publication

This policy will be:

- approved by the governing body;
- published on the school's website;
- made available to staff;
- made available to parents/carers;
- available in hard copy on request.

The school will ensure pupils are made aware of relevant aspects of the policy in an age-appropriate way.

30. Related school policies

This policy should be read alongside:

- Medical Conditions Policy
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Medicines Policy
- Safeguarding and Child Protection Policy
- Behaviour Policy
- Anti-Bullying Policy
- Equality Policy
- SEND Policy
- Educational Visits Policy
- Risk Assessment Policy
- Attendance Policy
- Emergency Procedures

31. External guidance and resources

Department for Education

Allergy safety in schools: statutory guidance

The school's primary statutory reference document.

Supporting pupils with medical conditions at school

To be read alongside the allergy safety guidance.

Keeping Children Safe in Education 2026

Relevant to the school's wider safeguarding arrangements.

The Key

Benedict's Law – allergy safety requirements

The Key's current summary of the September 2026 requirements. ([The Key Leaders](#))

Adrenaline devices in school

The Key's guidance on prescribed and spare adrenaline devices. ([The Key Leaders](#))

Other relevant organisations

- Department of Health and Social Care
- NHS
- Food Standards Agency
- British Society for Allergy & Clinical Immunology (BSACI)
- Anaphylaxis UK