

ALLERGY SAFETY POLICY

Hallwood Park Primary School and Nursery

Policy owner	Flora Graham, Headteacher and Allergy Safety Lead
Approved by	Interim Executive Board
Effective from	September 2026
Next review	July 2027, and at least annually thereafter
Applies to	All pupils, staff, volunteers and visitors, including breakfast club and nursery provision
Policy contact	admin@hallwood.set.org
Key safety principle Anaphylaxis is a time-critical medical emergency. Adrenaline must be given immediately when anaphylaxis is suspected. If in doubt, give adrenaline and call 999.	

1. Purpose and statutory basis

Hallwood Park Primary School and Nursery is committed to providing a safe, inclusive environment in which pupils with allergies can participate fully in education and wider school life. This policy sets out how the school reduces exposure to known allergens, supports individual pupils, responds to allergic reactions and learns from incidents and near misses.

This policy has been prepared with regard to section 100 of the Children and Families Act 2014, the Children's Wellbeing and Schools Act 2026, the Department for Education's Allergy safety in schools statutory guidance, Supporting pupils at school with medical conditions, the Human Medicines Regulations and the statutory Early Years Foundation Stage framework.

2. Responsibilities

Trust and school leadership

- The Trust, as proprietor, retains overall responsibility for ensuring appropriate allergy-safety arrangements are in place.
- The Interim Executive Board provides local oversight and approves this policy on behalf of the school's governance arrangements.
- Flora Graham is the named Allergy Safety Lead and is responsible for implementation, staff awareness, risk management, monitoring and policy review.
- Allergy risks will be included in the school's risk-management arrangements and reviewed following any serious incident or near miss.
- Lisa Binks, SENCo, will coordinate and review Individual Healthcare Plans (IHPs), working with parents, pupils, relevant staff and healthcare professionals.
- Dylan Wood and Flora Graham will check allergy arrangements within educational-visit planning and approval.

All staff

- All staff must understand this policy, complete required training, know how to access pupil allergy information and act promptly in an emergency.
- Staff planning food-related, sensory, science, DT or reward activities must check ingredients and class allergy information in advance.
- Staff must report reactions, medication errors and near misses without delay.

Parents and carers

- Parents must provide accurate, current information, prescribed medication and healthcare professional action plans, and notify the school promptly of any change.
- Medication must be in its original labelled packaging and within its expiry date.
- Parents must follow the school's no-nuts rule for packed lunches, celebrations and food brought onto the premises.

Pupils

- Pupils will be supported to understand their allergy in an age-appropriate way, avoid known allergens and tell an adult immediately if they feel unwell.
- Pupils must not share food. No pupil currently carries their own emergency medication; this will be reviewed individually as pupils mature.

3. Identification, records and healthcare plans

Allergies are identified through admission documentation and information provided to the school office by parents or carers. Parents are expected to notify the office immediately of a new diagnosis, a changed reaction, new medication or amended medical advice.

- The school office maintains the allergy register on Arbor.
- Relevant information is shared through Arbor, class medical lists and catering records on a need-to-know basis.
- The school will seek any Allergy Action Plan or Asthma Action Plan issued by a healthcare professional.
- Information will be checked during transition and updated whenever the school is notified of a change.

Individual Healthcare Plans

An IHP will be prepared where an allergy has a functional impact in school, creates a risk of harm and requires arrangements additional to or different from those made generally. This includes pupils requiring medication, specific risk-reduction measures, reasonable adjustments or an individual emergency response.

- The IHP will record the known allergen, symptoms, risk-reduction measures, medication, storage and access arrangements, emergency response, participation in activities and review arrangements.
- A current photograph and emergency contact details will be included where appropriate.
- Any clinician-issued Allergy or Asthma Action Plan will be attached or clearly referenced.
- The IHP will be reviewed at least annually and sooner following a reaction, near miss, medication change or updated action plan.

Data protection and information sharing

Health information is special-category personal data. It will be held securely and shared only where necessary to protect and support the pupil. Staff, caterers and visit leaders will receive the information they need to act safely without unnecessary disclosure or stigmatisation. Parents may contact the school if they believe information is inaccurate or has not been updated.

4. Staff training and awareness

All staff present while pupils are on site will complete allergy awareness, anaphylaxis emergency response and asthma awareness training at least annually. This includes teachers, support and office staff, lunchtime and catering staff, breakfast-club staff, temporary and agency staff, supply teachers, peripatetic staff and regular volunteers.

- The annual programme will include National College allergy training and school-specific briefing on local procedures, medication locations, pupil information, emergency roles and incident reporting.
- School-specific training will include practical familiarisation with the particular adrenaline auto-injector devices held by the school and how to administer them in an emergency.

- New staff will complete training as part of induction. Supply, temporary and cover staff must receive an appropriate briefing before taking responsibility for pupils and complete the required allergy training.
- First-aid training alone is not treated as sufficient allergy-awareness training.
- Where a pupil requires individual clinical support beyond school-level arrangements, competency or delegation requirements will be agreed with the relevant healthcare professional.

5. Preventing exposure to known allergens

No-nuts rule

Hallwood Park operates a no-nuts rule: nuts and products containing nuts must not knowingly be brought into, supplied or used in school. This includes packed lunches, snacks, birthday or celebration food, cooking ingredients, rewards and resources used in lessons or play.

Important limitation The school cannot guarantee that the environment is entirely free from nuts or other allergens. The no-nuts rule reduces risk but does not replace individual risk assessment, IHPs, staff training, prescribed medication or emergency procedures.

School meals and breakfast club

- Edsential provides the school meal service. Menus are shared with parents.
- The school will work with Edsential to ensure legally required allergen information is available, individual dietary requirements are identified and appropriate controls are used to reduce cross-contact.
- School leaders will maintain oversight of catering arrangements; allergy safety is not delegated solely to the catering provider.
- Breakfast club is provided and served by school. Staff will check pupil allergy information, ingredients and preparation arrangements before food is served.
- At every meal and snack time in the early years, a designated member of staff will check that the food provided is suitable for each child by referring to current allergy and dietary information before it is served.
- Reasonable adjustments will be made so eligible pupils with allergies can access their free school meal safely.

Food brought from home

- Packed lunches are permitted but must not contain nuts or products containing nuts.
- Food brought for birthdays or other celebrations must be nut-free and have ingredients and allergens clearly labelled. Unlabelled food will not be distributed.
- Food will not be shared between pupils unless a member of staff has checked the relevant allergy information and ingredients.

Curriculum, rewards and sensory activities

Food may be used in DT, science, sensory play and rewards. The member of staff planning the activity must check the full ingredient and allergen information against the class allergy list in advance. Nuts must not be used. Suitable adjustments or alternatives will be provided so pupils with allergies can participate without avoidable risk or exclusion.

Airborne and contact allergens

Where a pupil has a known airborne or contact allergy, the school will assess the particular risk and record proportionate controls in the pupil's IHP. The school does not currently arrange regular contact with animals, animal feed or similar resources; any future activity will be risk assessed before it takes place.

6. Medication and access

Prescribed medication

- Prescribed antihistamines and adrenaline devices are kept in clearly identified medical storage boxes immediately outside classrooms for rapid access.
- Where a pupil has been prescribed adrenaline, two prescribed devices must be available at school at all times, together with the pupil's current Allergy Action Plan.
- Boxes must remain readily accessible to adults and must not be locked away.
- Pupils' medical boxes will be taken to the location in use for playtimes, PE, lunch, outdoor learning and clubs, and on educational visits.
- Prescribed adrenaline devices remain at school. Parents remain responsible for ensuring separate devices are available for journeys to and from school where these have been prescribed.
- The school will maintain records of pupils with prescribed medication and check that devices remain in date. Parents will be asked to replace expired or used medication promptly.
- Medication prescribed to an individual will be used first where it is available. Spare medication does not replace a pupil's own supply.

Spare adrenaline devices

The school holds four spare adrenaline auto-injectors (AAIs) in the school office: one pair of 150 microgram devices and one pair of 300 microgram devices. This provides age-appropriate doses for the primary and nursery age range, in line with current clinical and DfE guidance.

- Spare AAIs will be stored in pairs, clearly labelled, readily accessible and not locked away.
- Flora Graham will oversee documented monthly checks of the location, quantity, dose, packaging, device condition and expiry dates, and arrange timely replacement, including safe disposal of used auto-injectors.

In the absence of the Headteacher, responsibility for medication monitoring, expiry-date checks and replacement arrangements may be delegated to a suitably trained member of the senior leadership team to ensure continuity of provision.

- Arrangements will ensure that adrenaline can be brought to any person on the school site within five minutes. The location and number of devices will be reviewed if the site use or pupil profile changes.

Records of monthly inspections, expiry dates, quantities held, device use, replacement and disposal will be maintained and reviewed as part of the school health and safety monitoring arrangements.

- A spare AAI may be used in an emergency in accordance with current law and guidance, including where an individual experiences anaphylaxis for the first time.

Emergency asthma kit

The school keeps an emergency salbutamol inhaler and spacers in the school office. It may be used only for a pupil who has been diagnosed with asthma or prescribed a reliever inhaler, whose own inhaler is unavailable or unusable, and for whom written parental consent has been obtained. The kit, inhaler dose counter and expiry date will be checked monthly. Use will be recorded and parents informed.

7. Recognising and responding to anaphylaxis

Anaphylaxis may occur with or without a rash or other mild symptoms. Staff must suspect anaphylaxis where there is a sudden problem involving airway, breathing or circulation, particularly following possible exposure to an allergen.

- Airway: swelling of the tongue or throat, difficulty swallowing, hoarse voice or noisy breathing.
- Breathing: persistent cough, wheeze, breathing difficulty, rapid breathing or blue/grey colour.
- Circulation: dizziness, collapse, pale or clammy skin, confusion, reduced consciousness or cardiac arrest.

Emergency procedure

1. Give adrenaline immediately using the individual's prescribed device if available; otherwise use a suitable spare device. If in doubt, give adrenaline.
2. Call 999 and state 'anaphylaxis'. Leanne Molyneux, Flora Graham or Lisa Binks will make the call where available; any staff member must call immediately if delay would otherwise occur.
3. Keep the person lying flat with legs raised. If breathing is difficult, allow them to sit with legs extended. Do not allow them to stand or walk, even if they appear to improve.
4. The nearest available first aider will bring the medication to the person. Do not move the person to the medication.
5. Give a second dose of adrenaline after five minutes if symptoms have not improved.
6. Flora Graham will meet the ambulance and contact parents. If unavailable, Lisa Binks or Dylan Wood will undertake these roles. Staffing circumstances must never delay treatment or the 999 call.
7. Follow the pupil's Allergy Action Plan where available and tell ambulance staff what was given and when.
8. Stay with the person and continue monitoring. Antihistamine or an asthma inhaler must never be given instead of adrenaline to treat anaphylaxis.

Mild or moderate allergic reactions

Staff will follow the pupil's Allergy Action Plan and IHP, monitor the pupil closely and ensure emergency medication is immediately available. A reaction that progresses to airway, breathing or circulation symptoms will be treated as anaphylaxis without delay. Parents will be informed of any reaction.

8. Educational visits and activities away from school

- Pupils with allergies will be included in visits and activities with reasonable adjustments and proportionate planning.
- Visit risk assessments will address known allergens, food and catering, travel, accommodation, access to emergency care, staff competence and communication with external providers.
- The visit leader will check the pupil's IHP and action plan and ensure prescribed medication, including two adrenaline devices where prescribed, accompanies the pupil and remains immediately accessible.
- Dylan Wood and Flora Graham will check allergy arrangements before approving the visit.
- A trained member of staff will be available to administer adrenaline. The pupil must not leave the premises without the required medication.

9. Incidents and near misses

All allergic reactions, anaphylaxis, medication errors and significant allergy-related near misses will be recorded promptly on My Health and Safety. Parents may also report an incident that becomes apparent after the pupil has returned home.

- The Headteacher will investigate and involve the Trust, local authority, healthcare professionals, caterer, environmental health, regulator or other external body where required.
- The review will consider whether the policy, IHP, action plan and risk controls were adequate and followed; whether training or practice needs strengthening; and what action is required to prevent recurrence.
- Relevant pupils and parents will be involved in reviewing individual arrangements.
- The policy and risk register will be updated where learning indicates that change is needed; the school will not wait for the annual review date.

10. Wellbeing, inclusion and bullying

The school recognises that living with allergy can cause anxiety and affect participation and wellbeing. Staff will listen to pupils and parents, avoid unnecessary exclusion, make reasonable adjustments and promote increasing independence in an age-appropriate way.

The school recognises that, in some circumstances, an allergy may meet the definition of a disability under the Equality Act 2010. Where this is the case, the school will make reasonable adjustments to ensure pupils are able to access education and wider school life safely and without disadvantage.

Bullying, teasing, threatening a pupil with an allergen, deliberately contaminating food or belongings, or pressuring a pupil to eat unsafe food will be treated seriously under the Behaviour and Anti-Bullying policies. Such behaviour is incompatible with the school's expectations of being Ready, Respectful and Safe.

Age-appropriate allergy awareness will be included in PSHE and the assembly schedule. Any pupil-specific awareness will be agreed sensitively with the pupil and parents and will not replace trained adult supervision or emergency arrangements.

11. Communication and policy availability

- This policy will be published on the school website and made available in hard copy from the school office on request.
- Staff will be made aware of the policy through annual training, induction and operational briefings.
- Parents should contact admin@hallwood.set.org with allergy information, changes or concerns.

12. Monitoring and review

Flora Graham will monitor implementation and review this policy by July 2027 and at least annually thereafter. It will be reviewed sooner following a serious incident, near miss, significant change in pupil need, updated statutory guidance or a change in school operations.

Related policies and guidance

- Supporting Pupils with Medical Conditions / Administration of Medicines Policy
- First Aid Policy
- Behaviour Policy and Anti-Bullying Policy
- Educational Visits Policy
- Health and Safety Policy
- Data Protection Policy
- DfE: Allergy safety in schools statutory guidance (2026)
- DfE: Supporting pupils at school with medical conditions
- DHSC: Guidance on the use of emergency adrenaline auto-injectors in schools
- DHSC: Guidance on the use of emergency salbutamol inhalers in schools

Approval record

Approved by	Interim Executive Board
Chair	Sarah Murcott
Approval date	September 2026
Next review	July 2027