



Allergy Safety Policy

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Approved by	Principal	Signed	
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1. Aims

This policy aims to set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction.

2. Legislation and Guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on [allergy safety in schools](#) and [supporting students 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:

[Children's Wellbeing and Schools Act 2026](#)

[The Food Information Regulations 2014](#)

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

3. Roles and Responsibilities

3.1 Allergy Safety Lead

The nominated allergy lead is the Business Manager who is responsible for:

- Implementing this allergy safety policy
- Contributing to the review of the allergy safety policy
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AAs)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All students with a known food or insect sting allergy have up-to-date allergy action plan
- All staff receive regular allergy awareness 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
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
- What lessons there are to learn
- Any potential changes to the medical conditions and/or allergy safety policies and/or to any student's IHCP

3.2 Teaching and Support Staff

All teaching and support staff are responsible for:

- 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 students 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 students with allergies

3.3 Designated Members of Staff

All staff at DSTC will have received allergy training and therefore are able to assist a student in an emergency to administer an AAI or inhaler.

3.4 Parents

Parents are responsible for:

- 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 two in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc and making sure these are replaced in a timely manner to ensure they remain in date, one AAI and or inhaler is to remain with the Pastoral Lead labelled with their child's name.
- Carefully considering the food they provide to their children as packed lunches and snacks, and trying to limit the number of allergens including ensuring compliance with the DSTC food requirements to be a nut and white fish free school.
- Updating the school on any changes to their child's condition
- Liaising with the school to complete the allergy / asthma plan document which will be reviewed annually.

3.5 Students with Allergies

These students are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector
- Carrying their adrenaline auto-injector on their person and only using it for its intended purpose (first aiders are still expected to help administer the AAI if the student is not able to do so)

3.6 Students Without Allergies

These students are responsible for being aware of allergens and the risk they pose to their peers.

4. Assessing Risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying Students at Risk

We will:

For new starters, send via applica to all parents/carers of students after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the student has and whether they carry medication. When a student has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks.

Send a reminder to parents/carers at the start of each year asking them to update their child's medical information as necessary.

We ask that parents/carers proactively inform us by either phone call to the school email office@dstc.kent.sch.uk if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

We will:

- Ask new staff to provide details of their allergies in advance of their start date.
- Ask visitors to provide details of their allergies at the start of their visit.

4.3 Individual Healthcare Plans (IHCP)

Not all children with an allergy will require an IHCP. Some allergies will have little or no impact on the student while they are at school, or pose no risk. Some allergies will not require arrangements which are additional to or different from those made generally.

However at DSTC all students with an allergy that has been identified by the parent/ careers medical professional, staff or student themselves will have an Allergy Plan. This will be flagged on the school MIS system (Bromcom).

The Allergy Lead is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a student's allergy can be managed through the adjustments made under the school's allergy plan policy or whether an IHCP is required to specify arrangements that reflect the student's circumstances.

4.4 Register of Students with Known Allergies

The school maintains a register of students who have a known allergy and an alert flag is recorded on MIS - Bromcom The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a student has been prescribed AAIs
- Where a student has been prescribed an AAI, whether parental consent has been given to administer emergency medication

A photograph of each student to allow a visual check to be made The register is kept in the shared medical drive and in a folder at Reception and can be checked quickly by any member of staff as part of initiating an emergency response.

As part of a students allergy assessment, parents guidance will form the basis for the need for a risk assessment for any student 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

5. Hygiene Procedures

- Students are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Students have their own water bottles

5.1 Catering

The school, via the catering provider Independent Catering, is committed to providing safe food options to meet the dietary needs of students with allergies.

Catering staff receive appropriate training and are able to identify students with allergies.

The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements.

School menus are available for parents 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 students.

Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing students 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.

5.3 Food Restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage students and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. **Therefore, we are a NUT FREE and WHITE FISH FREE SCHOOL.**

5.4 Insect Bites/Stings

When outdoors:

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

5.5 Support for Mental Health

Students with allergies will have additional support through regular check-ins with their class teacher/form tutor and pastoral lead.

5.6 Events and School Trips

For events, including ones that take place outside of the school, and school trips, no students with allergies will be excluded from taking part. Students at risk of anaphylaxis should have their own AAI with them.

The school will plan accordingly for all events and school trips and arrange for the staff members involved to be aware of students' allergies. Appropriate measures will be taken in line with the school's AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for Handling an Allergic Reaction

6.1 Register of students with AAI

All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately.

Staff are trained in the administration of adrenaline to minimise delays in an emergency.

If the student has an allergy action plan, this must be followed.

A spare school AAI device will only be used if:

- The student does not have a prescribed AAI
- The student's prescribed AAI are not available or misfire

OR IF DIRECTED BY EMERGENCY SERVICES CALL HANDLERS

The school maintains a list of students who have been prescribed AAI.

Where a student 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 student.

The register is kept with the spare AAI's and can be checked quickly by any member of staff as part of initiating an emergency response.

7. Adrenaline auto-injectors (AAIs)

Students with prescribed AAI should carry their devices with them continuously, including during journeys to and from school as well as on educational visits. We advise that two auto-injectors are retained at all times. Students must take their personal AAI home at the end of each day, and parents are responsible for ensuring all medication remains in date.

We follow the Department of Health and Social Care's Guidance on using [emergency adrenaline auto-injectors in schools](#),

7.1 Purchasing of Spare AAI

The Business Manager is responsible for buying AAI and ensuring they are stored according to the guidance.

The AAI and Asthma inhaler with spacers will be ordered from Eureka online pharmacy.

DSTC will have four emergency EpiPen AAI and Asthma inhalers these will be stored in the following locations:

- The Hub (PL Office)

- Medical Room
- PE Office
- Main Office (to be collected and taken on all school trips)

The dosage required for all Epipens is 0.3mg

7.2 Storage (of both spare and prescribed AAls)

The allergy lead will make sure all AAls 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
- Spare AAls will be kept separate from any student's own prescribed AAI.

7.3 Maintenance (of spare AAls)

The Business Manager is responsible for checking monthly that:

- The AAls are present and in date
- Replacement AAls are obtained when the expiry date is near

7.4 Disposal

AAls can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions in the DSTC medical room sharp bin.

7.5 Use of AAls Off School Premises

Students at risk of anaphylaxis who are able to administer their own AAls should carry their own AAI with them on school trips and off-site events

A first aider will be present on school trips and off-site events

7.6 Emergency Anaphylaxis Kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAls - Epipen 0.3mg
- Spare Asthma Inhalers and Spacers
- Instructions for the use of AAls
- Instructions on storage
- Manufacturer's information
- A list of students to whom the AAI can be administered

8 Serious Incidents and 'near misses'

A serious incident is any event relating directly to a medical condition (including allergy) in which a student, member of staff or visitor with a medical condition or allergy is harmed or is placed at an

immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A 'near miss' is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

9.1 Incident Recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident log, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and students responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident Reporting

The parents/carers of a student aged up to 16 should be notified of the incident or 'near miss' as soon as possible. In the case of a student aged 16 and over, the school will confirm that the student agrees that their parents/carers should be informed.

The school will share the report with the student's parents, the student or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the student is at home. This means that incident reporting is not limited to staff – the student, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with the Business Manager via the accident log. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the student's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalisation. For example, where a student has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See [how to make a RIDDOR report](#)]

- In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy Awareness

10.1 Staff Training

The school ensures that all staff expected to be present during times when students are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, regular supply teachers, peripatetic staff, regular agency workers and regular volunteers. It also includes catering staff and others who may oversee students at breakfast or after-school clubs. It does not include contractors carrying out work with no student-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school has purchased 'training pens' from Jext so staff can practise safely and be familiar with the differences.

The school will conduct allergy safety drills annually. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist
- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis

Know how to respond in an emergency, including:

- Calling emergency services and informing parents/carers
- How to locate and administer emergency medication
- How to use the medication/device in an emergency
- Understand the impact allergy can have on a student's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether a student or staff member has an allergy or IHCP flag.
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or 'near miss')

10.2 Awareness of Allergy Safety Policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

11. Wellbeing

Students with allergies will have additional support through:

- Regular check-ins with their PL
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis

The school will respond to any instance of bullying in line with its behavior policy.

11.1 Wellbeing Support Following an Incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the student but their family, those involved in responding, and any witnesses. The school will provide support to those involved.

12. Information Sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

Links to Other Policies

This policy links to the following policies and procedures:

Health and safety policy

Supporting students with medical conditions policy