Reading Girls' School

Name of Policy	Allergy Safety Policy
Scope of Policy	All pupils with allergies
Approved by	Principal
Date of Approval	September 2026
Review period	Annually
Review Date	September 2027

GROWING STRONGER TOGETHER

THAMES LEARNING TRUST

Contents

1. Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community
- Reflect Reading Girls' School's identity as a girls' school, ensuring every pupil, whatever her background, feels safe, included and confident to be open about her allergy needs

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety 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

3. Roles and responsibilities

3.1 The governing board

The governing board is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed
- The school has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis

The governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy safety lead

The nominated allergy safety lead is Angela Wright, Assistant Principal for Inclusion and SENCo.

They're responsible for:

- Implementing this allergy safety policy
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD)

- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All pupils who require support with allergies have an up-to-date individual healthcare plan (IHP)
    - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
    - 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 pupil's IHP

3.3 Principal

The Principal is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances

3.4 Named senior first aiders

Joan Halfacree, Kate Thomson and Kate Bevan, the school's named senior first aiders, are responsible for:

- Checking spare AAIs are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach
- Working in rotation with the wider team of first aid staff when carrying out these checks, so that effort is not duplicated

These staff are operational first aid/AAI-checking staff and are not separate Allergy Safety Leads (see section 3.2).

3.5 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety 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
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.7 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AD on their person and only using it for its intended purpose
- Understanding how and when to use their AD

3.8 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.

3.9 Key contacts for allergy-related queries

For allergy-related issues or queries concerning a member of staff, contact Kate Bevan — see section 3.4.

For allergy-related issues or queries concerning a pupil, contact her Head of Year in the first instance, who will liaise with the allergy safety lead and the named first aiders (Joan Halfacree, Kate Thomson and Kate Bevan) as needed.

4. Identifying individuals at 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 pupils at risk

Our arrangements for identifying pupils with known allergies follow the same process we use to identify pupils with other medical conditions, as set out in our 'Supporting Pupils with Medical Conditions' policy (see section 14).

We will:

- For new starters, send a letter home to all parents/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a letter home and put arrangements in place within 2 weeks
- Ask tutors to collect completed letters and pass on allergy information to the pupil's Head of Year, who is responsible for maintaining our central allergy record (a spreadsheet) for pupils in her year group
- Send a reminder to parents/carers via Edulink at the start of each year asking them to update their child's medical information as necessary
- Send any further reminders or requests for updated information electronically via Edulink during the school year, as needed

We ask that parents/carers proactively inform us if their daughter's medical needs change during the school year, by contacting her Head of Year directly, or via a message through Edulink.

4.2 Identifying staff and visitors at risk

Staff

Identification of allergies among staff is arranged and managed by the Trust's Human Resources team. As part of the pre-employment and induction process, Allison Worley, Human Resources Manager, asks all new staff to provide details of any known allergy, including any medication they carry. Any ongoing allergy-related queries or updates from existing staff should be directed to Kate Bevan, the school's named senior first aider (see section 3.4).

Visitors

When inviting a visitor to the school, the member of staff arranging the visit will send them an electronic form. The form includes our allergy statement and asks the visitor to provide details of any personal allergy they may have, in line with government guidance, so that both the visitor and our wider school community are protected.

4.3 Individual healthcare plans (IHP)

A pupil should have an IHP where her allergy:

- Has a functional impact on her in the school environment
- Presents a risk of harm to her; and
- Requires arrangements which are additional to or different from those made generally

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

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

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

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school or college, their IHP will be shared as part of the transition.

A letter will be sent home to the parents/carers of any pupil with a known allergy, explaining the purpose of the IHP and seeking medical and parental consent for staff to administer the emergency medicines specified in the pupil's action plan, including adrenaline for anaphylaxis or a reliever inhaler for an asthma attack.

4.4 Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

Allergy and asthma action plans are created, where required, in consultation with the pupil's parents/carers and, where possible, a relevant healthcare professional, and are kept together with the pupil's prescribed AD, as well as attached to her IHP.

4.5 Register of pupils with known allergies

This register links to, and supports, our separate 'Supporting Pupils with Medical Conditions' policy (see section 14).

The school maintains a central allergy record of pupils who have a known allergy. Heads of Year are responsible for maintaining the record for pupils in their year group (see section 4.1), and it is made accessible to relevant staff via Edulink.

The record includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed ADs (and if so, what type and dose)
- Where a pupil has been prescribed an AD, whether parental consent has been given to administer emergency medication
- A photograph of each pupil to allow a visual check to be made (this will require parental consent)

The register — and each pupil's allergy information summary, drawn from her IHP — is accessible to staff via Edulink, so that key information can be checked quickly during lessons, on the registration system, or elsewhere around the school as part of initiating an emergency response.

Allowing all pupils to keep their ADs with them will reduce delays and allows for confirmation of consent without the need to check the register.

5. 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.

6. Minimising risk

The school will take reasonable and proportionate steps to reduce the risk of exposure to known allergens while avoiding unnecessary exclusion of pupils with allergies.

6.1 Hygiene procedures

The school will:

- Remind pupils to wash their hands before and after eating
- Prohibit the sharing of food, food containers and food utensils
- Encourage pupils to use their own named water bottles, and ensure that lunch boxes provided to pupils with food allergies are clearly labelled with the name of the pupil for whom they are intended
- Seek parental engagement and permission in advance where food is not directly provided by the school

- Follow appropriate cleaning and hygiene arrangements to reduce the risk of cross-contamination

The school will not operate a blanket ban on specific foods unless a specific risk assessment identifies this as necessary.

6.2 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
- 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/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers
- Where changes are made to school menus, we will make sure these comply with legislation, and 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)
- Where food is provided by the school, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

6.3 Insect bites/stings

Our procedures for preventing and dealing with insect bites and stings include:

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- Pupils with a known allergy to insect stings carry any AD or antihistamine as advised in their allergy action plan, and staff supervising outdoor activities are made aware of pupils at risk

6.4 Animals

Our hygiene procedures for managing allergies to animals, such as dogs, include:

- 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

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part

- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs with them
- Staff trained to administer adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AD protocols for off-site events and school trips (see section 8.5)

7. Procedures for handling an allergic reaction

- 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 pupil has an allergy action plan, this must be followed
- A spare school AD device will only be used if:
    - The pupil does not have a prescribed AD
    - The pupil's prescribed AD are not available or misfire

If a pupil shows signs of a possible allergic reaction or anaphylaxis, staff should use Edulink's call-out feature to alert office staff or a First Aider immediately, so that the nearest adrenaline device can be brought to her without delay. Emergency services should always be called without hesitation in any suspected case of anaphylaxis.

8. Adrenaline devices (ADs)

8.1 Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Pupils with prescribed ADs should take them home with them at the end of each school day, and parents are responsible for ensuring that they are in date.

If a pupil cannot keep her ADs with her in the classroom (due to age or other considerations), then the devices will be stored as follows:

- Centrally, in the Medical Room, which is unlocked and accessible to staff at all times during the school day
- No more than 5 minutes away from anywhere on the school site
- At room temperature, in line with the manufacturer's guidelines, protected from direct sunlight and extremes of temperature

Where a pupil's prescribed AD is stored centrally rather than carried on her person, a member of staff can use Edulink's call-out feature to request that a First Aider or member of office staff bring the device to her immediately, wherever she is on site.

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

Pupils who keep their prescribed AD with them are responsible, together with their parents/carers, for taking it home at the end of each school day and returning it the following morning; parents/carers remain responsible for ensuring it stays in date. Records of which pupils have been provided with a prescribed AD and allergy action plan are kept in the central allergy record and on each pupil's IHP, both accessible to staff via Edulink.

8.2 Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school's spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs and an emergency asthma reliever inhaler, and ensuring they are stored according to the guidance.

Spare ADs are sourced from a local pharmacy. The allergy safety lead determines the number of devices and the dosage required, based on the Resuscitation Council UK's age-based criteria (see page 11 of the DHSC's AAI guidance), and the school buys a single brand of AAI to avoid confusion for staff.

Spare ADs will be stored:

- In the reception area, the PE department, and the staff room — centralised, staff-accessible locations chosen because they reflect the different areas of the school site and the range of activities pupils undertake during the school day
- No more than 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion

Our first aid staff, working in rotation so that checks are not duplicated, are responsible for:

- Checking monthly that spare ADs and the emergency asthma reliever inhaler are present and in date
- Obtaining replacement ADs when the expiry date is near

8.3 Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions (for example, in a sharps bin for collection by the local council).

8.4 Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or pupils for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events.

Before any trip or off-site event, a risk assessment will be carried out which considers whether spare ADs should be taken for emergency use. As part of this, the dates and condition of any spare ADs to be taken will be checked before departure, and a named first aider attending the trip will be responsible for the safekeeping, use and return of the devices.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, 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 book, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils 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 pupil aged up to 16 should be notified of the incident or 'near miss' as soon as possible.

As Reading Girls' School is a secondary school, in the case of a pupil aged 16 and over, we will confirm that she agrees that her parents/carers should be informed.

The school will share the report with the pupil's parents, the pupil 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 pupil is at home. This means that incident reporting is not limited to staff — the pupil, 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 Angela Wright, Assistant Principal for Inclusion and SENCo. 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 pupil's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

All incident reports are shared electronically with Angela Wright via a shared electronic location, to which Heads of Year also have access.

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 hospitalization. For example, where a pupil 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
- Where the school operates as a food business, to the local authority: any allergen-related food safety incidents. See how to report a food safety issue

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

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

The school will conduct allergy safety drills twice each academic year: at the start of the year, on the third INSET day, and at the end of the year, on the final INSET day. Each drill 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 pupil's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan
- 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 a 'near miss')

The school will ensure that arrangements are in place for supply, temporary and cover staff to receive essential allergy information before or when they begin working with pupils.

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.

Allergy awareness is embedded within our PSHE curriculum. We use resources from Allergy School to create engaging, age-appropriate content on allergy, delivered through assemblies and tutor time, to build pupils' knowledge and understanding of allergy and how to support their peers.

11. Wellbeing

We recognise that pupils with allergies can experience anxiety and, in some cases, bullying relating to their allergy. Our approach to supporting their mental health and wellbeing sits alongside our behaviour policy and the wider measures we have in place to prevent bullying.

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their Head of Year and, where relevant, their Key Person if they have SEN/D, or the school nurse, during their termly visits
- 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 behaviour 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 pupil but their family, those involved in responding, and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See section 9 of the policy for more detail on incidents and 'near misses'.

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.

13. Monitoring arrangements

This policy will be monitored by the allergy safety lead.

It will be reviewed and approved annually by the allergy safety lead, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

14. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- School food policy
- Data protection policy
- Behaviour policy
- Anti-bullying policy

Our 'Supporting Pupils with Medical Conditions' policy is a separate policy from this Allergy Safety Policy. The two should be read together: the medical conditions policy sets out our general approach to pupils with medical needs, while this policy provides the detailed arrangements specific to allergy and anaphylaxis.