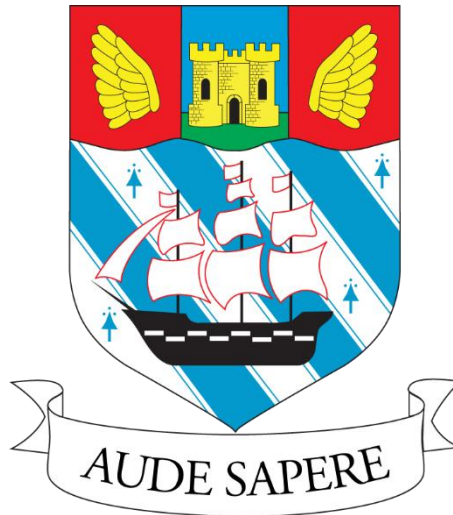




Torquay Girls Grammar School

Allergy Safety Policy

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Section 1.0 Aim of policy

The objective of this policy is to attain and maintain high standards of allergy safety throughout Torquay Girls Grammar School. All persons conducting activities under the name of Torquay Girls Grammar School will adhere to this Allergy Safety Policy.

Allergy is a medical condition in which the body's immune system has an abnormal reaction to normally harmless substances such as food, insect stings, contact allergens and airborne allergens.

Anaphylaxis is a potentially fatal reaction affecting the Airway/Breathing/Circulation ("ABC"). Many individuals with allergies to food or insect stings are at risk of anaphylaxis.

Asthma is a lung disease caused by inflammation and tightening of the airways, it is frequently associated with allergy and anaphylaxis, because exposure to allergens can provoke an asthma attack, a potentially life-threatening condition.

Intolerance to foods or an ingredient that the body is unable to digest is different to allergy and does not cause a serious allergic reaction. It can cause long term health problems if not avoided. Common food intolerances include lactose and gluten. Coeliac disease is intolerance to gluten, found in rye, barley and wheat.

Section 2.0 Risk management

2.1 Identification of pupils with an allergy

Ordinarily, the pupil's parent/carer will notify the school that their child has an allergy. Parents/carers should ideally provide this in writing including whether they carry any medication (e.g. an adrenaline autoinjector device (AAI) or asthma reliever inhaler).

A pupil may disclose themselves that they have an allergy. The staff member to whom the disclosure is made should notify the Pastoral Team as soon as practicable.

Notification may also be received directly from the pupil's healthcare provider or from a school from which a child may be joining the school. The school may also instigate the procedure themselves when the pupil is returning to the school after a long-term absence.

Where a child is leaving the school their IHP and/or Allergy action Plan should be shared with the new school.

2.2 Identification of staff and visitors that have an allergy

All staff members will be asked to notify the school in writing if they have an allergy, including whether they carry any medication e.g. an adrenalin autoinjector (AAI) device or asthma relief inhaler.

Where possible, information on allergy should be sought in advance from visitors ahead of their first visit, especially if they are likely to be served food.

The school should consider on a case-by-case basis at what point it seeks information from staff and visitors regarding allergy and at what point it provides information about allergy to visitors, especially if they are likely to be served food.

Staff members and visitors will ordinarily manage the condition/allergy themselves without any support or monitoring from the school. If the visitor is a child their parent will ordinarily manage their child's condition/allergy themselves without support or monitoring from the school.

Emergency response procedures will apply to all individuals on the school site.

2.3 Procedure following the identification of an allergy

Except in exceptional circumstances where the pupil does not wish their parent/carer to know about their allergy, the pupil's parents/carers will be contacted by a member of the school's pastoral team as soon as practicable to discuss what, if any, arrangements need to be put into place to support the pupil. Every effort will be made to encourage the child to involve their parents while respecting their right to confidentiality. If a decision is made not to inform a parent/carer then the reasons for this should be documented and the decision should be reviewed by a senior member of staff.

Unless the allergy is short-term and relatively straightforward (e.g., the pupil can manage the condition/allergy themselves without any support or monitoring), a meeting will normally be held to:

- discuss the pupil's support needs.
- identify a member of school staff who will provide support to the pupil where appropriate.
- determine whether an individual healthcare plan (IHP) is needed and, if so, what information it should contain.

Where possible, the pupil will be enabled and encouraged to attend the meeting and speak on their own behalf, taking into account the pupil's age and understanding. Where this is not appropriate, the pupil will be given the opportunity to feed in their views by other means, such as setting their views out in writing.

The healthcare professional(s) with responsibility for the pupil may be invited to the meeting or be asked to prepare written evidence about the pupil's allergy for consideration. Where possible, their advice will be sought on the need for, and the contents of an IHP.

In cases where a pupil's allergy is unclear, or where there is a difference of opinion, the Assistant Headteacher in charge the inclusion strategy for pupils with medical needs will exercise their professional judgement, based on the available evidence, to determine whether an IHP is needed and/or what support to provide.

For children joining at the start of the school year, any support arrangements will be made in time for the start of the school term, where possible. In other cases, such as a new diagnosis, a newly identified allergy or a child moving to the school, every effort will be made to ensure that any support arrangements are put in place within two weeks.

Where the school becomes aware that a pupil has a severe allergy, it will treat this as a priority matter and ensure that an allergy action plan and any associated risk management measures are put in place without delay.

2.4 Individual Healthcare Plan

Any pupil whose allergy will require the school to put supportive arrangements in place should have them captured through an **Individual Healthcare Plan**. Individual Healthcare Plans set out what needs to be done to support a specific pupil with an allergy, how, when and by whom, including in an emergency.

Individual Healthcare Plans should be developed in collaboration with the pupil and their parents, taking account of any advice received from healthcare professionals.

Except in exceptional circumstances or where the healthcare provider deems that they are better placed to do so, the school will take the lead in writing the plan and ensuring that it is finalised and implemented.

Where the pupil has a special educational need identified in an Education Health and Care Plan (EHCP), the IHP will be linked to, or become part of that EHCP.

IHPs may include:

- details of the medical condition, allergy, its triggers, signs, symptoms, and treatments.
- the pupil's resulting needs, including medication (dose, side-effects, and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, and dietary requirements. Also environmental issues, e.g. crowded corridors, or travel time between lessons.
- specific support for the pupil's educational, social, and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods, or additional support in catching up with lessons, or counselling sessions.
- The level of support needed, including in emergencies; if a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring.
- who will provide this support, their training needs, expectations of their role, and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the pupil's condition/allergy and the support required.
- arrangements for written permission from parents/carers for medication to be administered by a member of staff or self-administered by the pupil during school hours.
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g., risk assessments.
- where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition/allergy and this should be identified within the plan.
- what to do in an emergency, including whom to contact and contingency arrangements; some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their IHP.

Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

2.5 Allergy and Asthma Action Plans

Pupils with a known allergy to food or insect stings should be issued with an appropriate Allergy Action Plan by their healthcare professional. These are medical documents designed to facilitate emergency response including in the case of anaphylaxis and an asthma attack.

The relevant healthcare professional is responsible for the content of Allergy and Asthma Action Plans. Whenever an updated Allergy and/or Asthma Action Plan becomes available, the pupil's IHP should be reviewed and incorporate it.

The pupil's IHP should attach the pupil's Allergy and/or Asthma Action Plan(s).

2.6 Records of pupils and staff with allergies

The school will keep a list of all pupils and staff with an allergy, an up-to-date photo, what medication they are prescribed, (e.g. AAI) and whether the pupil has an IHP and an Allergy Action Plan.

The school will keep a list of pupils and staff with known allergy (including an up-to-date photo and lists of their known allergen) in places where food may be served or handled.

Such lists will be kept in areas accessible to staff only.

2.7 Allergen risk assessment

In order to minimise the risk of individuals (whether pupils, staff or visitors, the school will carry out an allergen risk assessment of the school environment, including:

- Food and catering arrangements.
- Classrooms and other learning environments (e.g., art rooms, science laboratories, food technology rooms).
- Communal areas e.g. canteen, dining hall.
- Outdoor areas e.g., playing fields.
- Activities and events where food is present on school site e.g., school fairs, celebrations.
- Activities where other allergens are present on school site, e.g. animals.
- A separate and specific risk assessment to manage the risk of exposure to allergens on external visits or trips.

The allergen risk assessment will be carried out by the Director of Finance & Resources in conjunction with relevant staff including catering staff. The assessment will be reviewed at least annually and whenever there is a significant change to the school environment or catering arrangements.

The allergen risk assessment will identify:

- Allergens present in the school environment, including airborne or through contact.
- Pupils at risk of an allergic reaction.
- Other individuals, specifically staff and visitors at risk of an allergic reaction, if known.
- Measures to reduce the risk of exposure to allergens.
- Procedures to follow if a pupil has an allergic reaction.

Where the risk assessment identifies a risk, the school will take proportionate steps to manage that risk. This may include, for example, designated allergen-free zones, allergen-free options in the canteen, measures to identify children with allergy and measures to prevent cross-contamination.

2.8 Off-site visits and activities

The off-site Visit Leader will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a visit or activity off the premises.

Pupils at risk of anaphylaxis should have their own adrenaline device with them, and there should be staff trained to administer adrenaline in an emergency. The school may wish to consider whether it may be appropriate, under some circumstances, to take “spare” adrenaline devices in case of emergency use on some trips. However, this should not cause a lack of “spare” adrenaline devices on school premises.

Section 3.0 General arrangements for allergy safety

3.1 Policy implementation

This policy is published on the school’s website and available in hard copy on request.

The person with overall responsibility for the successful administering and implementation of this policy is the Director of Finance & Resources who has responsibility for ensuring that:

- sufficient staff are suitably trained to meet the known allergies of pupils
- induction training is given
- all relevant staff are made aware of the pupils’ allergies and supply teachers are properly briefed
- cover arrangements are in place to cover staff absences to ensure that someone is always available and on site
- risk assessments for off-site visits and other school activities outside the normal timetable are completed, including allergen risk assessments
- Individual Healthcare Plans (IHPs) are prepared where appropriate and are monitored. IHPs have Allergy Action Plans attached where they have been provided by healthcare professionals.
- The policy is reviewed annually or following an incident or near miss.

3.2 Staff training

The Assistant Head (Behaviour) is responsible for:

- Ensuring that all staff scheduled to be on site (including permanent, new and temporary staff, regular volunteers, and any person responsible for after-school clubs, peripatetic workers and agency workers) are aware of this allergy safety policy, trained in allergy awareness and emergency response and understand their role in its implementation at least annually. (This is not intended to include contractors carrying out work with no pupil facing role)

- Working with relevant healthcare professionals and other external agencies to identify staff training requirements and commission training required.
- Ensuring that there are sufficient numbers of trained staff available to implement the policy and deliver against all IHPs and allergy actions plans, including any specific training needs required by an IHP and in contingency and emergency situations.

In addition, all members of school staff will know what to do and respond accordingly when they become aware that a pupil or any individual needs help.

Where specific conditions require specialist training, including but not limited to the use of adrenaline auto-injectors (AAIs), the management of anaphylaxis, the use of blood glucose monitors or insulin pumps, the management of epileptic seizures, and the management of asthma attacks, the Assistant Head (Behaviour) will ensure that sufficient staff receive that training from an appropriately qualified healthcare professional (includes online training), and that competency is confirmed before a member of staff is asked to provide support.

Allergy awareness training will be provided to all staff. This will cover the nature and prevalence of food and other allergies, the signs and symptoms of allergic reactions and anaphylaxis, how to use an AAI, and the steps to follow in an emergency. A record of all staff training shall be maintained. Training will be refreshed at regular intervals and whenever there is a significant change to the conditions affecting pupils at the school.

Training will be delivered annually unless healthcare professionals involved in an individual's care advise otherwise and should be sufficient to ensure staff are competent and have confidence in their ability to support pupils and individuals with allergies, and to fulfil the requirements as set out in relevant IHPs and/or Allergy Action Plans. Induction arrangements for new staff will include training on this allergy safety policy, allergy awareness, and emergency response.

The school has in place appropriate levels of insurance regarding staff providing support to pupils with medical conditions, including the administration of medication. Copies of the school's insurance policies can be made accessible to staff as required.

Allergy awareness training should ensure 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, locating and administering emergency medication, and training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices).
- understand the impact allergy can have on a child or young person'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”).

Training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency, or delegation arrangements that may be needed where a pupil requires individual healthcare support beyond school-level allergy safety arrangements.

Raising allergy awareness with pupils will be carefully considered and managed in an age-appropriate way.

3.3 Individuals’ access to prescribed adrenaline devices

Pupils who are prescribed adrenaline will have rapid access to their devices at all times. All pupils will normally be expected to carry 2 devices in their school bag. Pupils will take individually prescribed AAIs home at the end of the day (including for use during the journey home). A 3rd device can be kept in reception/6th form office if the student/family wishes.

3.4 Spare adrenaline auto-injectors (AAIs)

All AAIs will be stored at room temperature and not locked away or kept in any location where access is restricted. Pairs of AAIs will be kept in:

- Main Reception
- 6th Form Café

The school will maintain a supply of spare, clearly labelled AAIs for use in an emergency. Spare AAIs may be used where:

- a pupil has been prescribed an AAI and is known to be at risk of anaphylaxis.
- the pupil's own AAI is not available (e.g., because it has been used, is out of reach, has expired, or has been lost).
- the pupil or other individual has had, or is judged to be having, an anaphylactic reaction.

Spare AAIs held by the school are for emergency use only and are not a substitute for a pupil's own prescribed AAI. Parents/carers are still required to provide the school with their child's in-date, personally prescribed AAI.

Spare AAIs will be stored in a clearly marked, accessible, and safe location known to all relevant staff. They will be contained in an ‘emergency anaphylaxis kit’ clearly marked as such and separate to the first aid kit. They will be checked regularly to ensure that they are in date and functional and replaced as required. This will also include any emergency asthma reliever inhaler and spacers, and instructions for use of all equipment.

All AAIs and instructions for use will be stored in pairs and the school will have two pairs of AAIs. These will be available to all students.

Following any use of a spare AAI, the Assistant Head (Behaviour) will ensure that a replacement is obtained promptly and that a record of the use is made.

3.5 Allergen management in catering and food provision

The school recognises that the management of allergens in food provision is a critical safety issue for pupils (and staff and visitors) with food allergies.

The school will:

- ensure that allergen information for all food and drink provided to pupils, staff, and visitors is available and clearly communicated.
- ensure that staff involved in food preparation and service are trained in allergen awareness and the prevention of cross-contamination.
- ensure that allergen-free options are available for pupils, staff, and visitors with known food allergies, as reflected in the allergen risk assessment.
- ensure that catering staff are made aware of pupils, staff, and visitors with known food allergies, and take appropriate steps to manage the risk.

The school will ensure that food served at school events, including fairs, celebrations, parties, and school trips, is managed in a manner that takes into account pupils, staff, and visitors with known food allergies. Where the school cannot control the allergen content of food served at an event, appropriate measures will be taken to ensure that affected pupils and individuals are kept safe, including consideration of what information is provided regarding allergens.

Any relevant information from a pupil's IHP or Allergy Action Plan will be shared with the Catering Manager on allergen management and will ensure that any relevant information from a pupil's IHP or Allergy Action Plan is shared with catering staff on a need-to-know basis, in compliance with data protection requirements.

3.6 Incident Reporting

Where serious incidents or "near misses" occur involving a pupil with an allergy, the incident should be recorded. It should be reported to the pupil's parents and the Board of Trustees alongside any statutory reporting. Following investigation, lessons should be learned from any serious incident or "near miss", prompting a review of the relevant policies and arrangements.

3.7 Wellbeing and Inclusion

The risk posed by allergy can be a significant cause of anxiety for pupils.

Measures the school will take to support the wellbeing of pupils with medical conditions and/or allergies, and allergy awareness may include:

- involving the pupil's parents and, where appropriate, the pupil themselves in developing and reviewing their IHP.

- ensuring proactive communication to the school community about allergy, ongoing awareness, and severity of risk.
- proactively engaging with new joiners, for example by offering a tour of the canteen.
- ensuring regular communication with members of the school community about medical conditions, allergies, and the awareness and appreciation of ongoing risks.
- addressing and respond to any bullying related to medical conditions and/or allergy under its anti-bullying policy.
- considering any appropriate support to the pupil and their parent/carer following any serious incident.

3.8 Emergency procedures – whole-school approach

Nothing in this policy prevents any person taking reasonable action in good faith to save a child or young person's life if they experience a life-threatening medical emergency.

The school adopts a whole-school approach to emergency preparedness in relation to allergies. This means that all staff, not just those directly named in a pupil's IHP or Allergy Action Plan, are equipped to respond appropriately in an emergency.

The Assistant Head (Behaviour) will ensure that:

- emergency procedures for the most common or highest-risk conditions affecting pupils at the school (including anaphylaxis, severe asthma attacks, hypoglycaemic episodes, and epileptic seizures) are clearly documented and accessible to all staff.
- all staff are trained on what to do if they encounter a pupil in a medical emergency, an anaphylactic reaction, or acute asthma.
- regular training and scenario-based exercises are carried out with staff to ensure preparedness, particularly in relation to anaphylaxis and other life-threatening conditions.
- spare emergency medication (including spare AAIs) is stored in an accessible, clearly marked location known to all staff. The location of emergency medication and the school
- 's emergency procedures are included in the induction of all new staff.

If a pupil, regardless of whether they have an IHP or Allergy Action Plan, needs urgent medical attention, staff will:

- call 999 immediately where there is any doubt about the seriousness of the situation.
- administer any emergency medication in accordance with the pupil's IHP/Allergy Action Plan (or, in the absence of a plan, their best clinical judgement).
- stay with the pupil until emergency services or a parent/carer arrives.
- notify the pupil's parent/carer as soon as practicable.
- complete a record of the incident.

3.9 Information sharing

A pupil's health information (including allergy) is considered special category data. The school has a lawful basis to hold, use, and share a pupil's special category health data. The school will need to hold, use, and share this information in order to ensure the pupil receives the support they need to stay safe and be included in education.

All individual pupil health data will be stored and processed in accordance with the school's student privacy notice.

4.0 Linked Policies and Legislation

This policy also links to our policies on:

- Health, safety and environmental
- Staff Behaviour / Code of Conduct
- Supporting Medical Needs
- Management of Outdoor Education, Visits and Off-Site Activities
- Safeguarding

This policy is based on advice from the Department for Education [Allergy safety in schools - GOV.UK](#) published in July 2026. This is statutory guidance 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. [Children's Wellbeing and Schools Act 2026: policy summary - GOV.UK](#)

This guidance sits alongside statutory guidance on 'Supporting Pupils with Medical Conditions'. [Supporting pupils with medical conditions at school - GOV.UK](#)

Other relevant legislation includes:

- [Children Act 1989](#)
- [Keeping children safe in education - GOV.UK](#)
- [Health and Safety at Work etc. Act 1974](#)
- [Equality Act 2010](#)
- [SEND code of practice: 0 to 25 years - GOV.UK](#)

This policy complies with our funding agreement and articles of association.

Appendix A: Allergen Icon Matrix

Downloadable template attached. This can be used to display allergen information. This, or an alternative version giving the same information, should be used by all staff and students providing food e.g. Charity cake sales.

[Allergen matrix](#)

A completed example is shown below:

FOOD MENU	Milk	Egg	Lupin	Sulphur Dioxide	Gluten	Celery	Crustaceans	Molluscs	Fish	Mustard	Soybean	Peanut	Sesame	Treenuts
														
Fish, bean and rice bowl Tilapia, black beans, slaw, guacamole and pickled onions	✓					✓			✓					
Seafood & Chorizo Paella Saffron rice, with chicken, prawns, clams and vegetables				✓			✓	✓						
Avocado & Cos Salad Mixed beans, edamame, herbs, carrots, peanuts and cashews											✓	✓	✓	✓