



Allergy and Anaphylaxis Policy

Related documents include:

- Sections 100, 100A and 100B of the Children and Families Act 2014, as amended by the Children's Wellbeing and Schools Act 2026.
- The Department for Education's 2026 statutory guidance on **allergy safety in schools** and supporting pupils with medical conditions.
- The Human Medicines Regulations 2012, as amended to permit schools to obtain spare adrenaline auto-injectors.
- The Equality Act 2010, where an allergy has a substantial and long-term adverse effect on a pupil's ability to carry out normal day-to-day activities.
- Applicable health and safety, food-information, data-protection and educational-visit requirements.

Legal Status:

Monitoring and Review

- This policy will be subject to continuous monitoring, refinement and audit by the Welfare Manager.
- The Welfare Manager will undertake a formal annual review of this policy for the purpose of monitoring and of the efficiency with which the related duties have been discharged, by no later than one year from the date shown below, or earlier if significant changes to the systems and arrangements take place, or if legislation, regulatory requirements or best practice guidelines so require.
- The next official date for review is **September 2027**

Introduction

Abbey College is committed to providing a safe, inclusive environment for pupils, staff and visitors affected by allergies.

The College recognises that anaphylaxis is a potentially life-threatening medical emergency. It will take reasonable and proportionate steps to reduce allergen exposure, prepare for emergencies and ensure pupils with allergies can participate fully in education, meals, trips and College activities.

The College will:

- Maintain and publish a **whole-college allergy safety policy**.
- appoint a **named senior allergy lead (Andra Groza)**.
- identify pupils with known allergies and establish an **Individual Healthcare Plan** for each affected pupil.
- provide suitable **allergy and anaphylaxis training for all staff**.
- maintain accessible, in-date **spare adrenaline auto-injectors**, in addition to pupils' prescribed devices.
- make appropriate arrangements for meals, lessons, trips, clubs and other College activities.
- record, report and review allergic reactions and near misses.
- review this policy at least annually and following any significant incident or legislative change.

This policy should be read alongside the school's medical conditions, first aid, safeguarding, educational visits, food and catering, inclusion, data protection and emergency-response policies.

Scope

Produced by:	AG	Date:	03/09/2026	Checked by:	JKS	Date:	04/09/2026	Approved by:	MN	Date :	04/09/2026
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This policy applies to:

- all pupils, including those without a previously diagnosed allergy.
- employees, agency workers, volunteers, governors and contractors.
- catering, cleaning, and transport providers.
- all activities under the school's control, including trips and residential visits.

Although the primary legal duties concern pupils, the school's emergency arrangements will also cover any staff member or visitor showing signs of suspected anaphylaxis.

Responsibilities

Governing body or management committee

The responsible authority will:

- ensure that effective allergy-safety arrangements are established and adequately resourced.
- approve, publish and review this policy at least annually.
- nominate a senior leader with operational responsibility.
- monitor training, medication, incidents and compliance.
- ensure that contractors understand and follow the school's allergy arrangements.
- receive anonymised reports on incidents, near misses and policy effectiveness.

Principal and allergy lead

The Principal and named allergy lead will:

- oversee implementation of this policy.
- maintain an up-to-date allergy register.
- ensure that Individual Healthcare Plans and emergency action plans are completed and reviewed.
- coordinate staff training and retain training records.
- oversee the purchase, storage and monitoring of spare adrenaline auto-injectors.
- ensure suitable communication with pupils, parents, staff and contractors.
- review incidents and implement lessons learned.
- make sure allergy arrangements extend to trips and off-site activities.

College staff

All staff must:

- complete required allergy-awareness training and attend updates.
- know how to obtain emergency medication quickly.
- understand the emergency procedure and act without delay.
- follow Individual Healthcare Plans and agreed risk controls.
- not exclude or unnecessarily restrict a pupil because of their allergy.
- report allergic reactions, medication errors, accidental exposures and near misses.

Parents and carers

Parents and carers are expected to:

- disclose diagnosed or suspected allergies promptly.
- supply accurate medical information and emergency contact details.

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Abbey College in Malvern Ltd (Number 08661073)

Registered in England and Wales. Registered office: 253 Wells Road, Malvern, Worcestershire, WR14 4GF

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- participate in preparing and reviewing the Individual Healthcare Plan.
- provide the pupil's prescribed medication in its original labelled container.
- provide the recommended number of in-date adrenaline auto-injectors.
- replace medication before it expires or following use.
- notify the College immediately of changes to diagnosis, treatment or risk.
- reinforce age-appropriate allergy self-management with their child.
- A school's spare auto-injectors do **not** replace the pupil's own prescribed devices. allergyuk.org

Pupils

Taking account of age, understanding and medical advice, pupils should:

- avoid known allergens and unsafe food sharing.
- tell an adult immediately if they feel unwell or believe they have been exposed.
- carry their medication when agreed in their healthcare plan.
- treat other pupils' medical information respectfully.
- never tamper with, hide or misuse medication.

Reducing the risk of Exposure

The College cannot guarantee an entirely allergen-free environment. Blanket food bans will not be presented as eliminating risk. Instead, the College will use pupil-specific and activity-specific risk assessment.

Controls may include:

- effective handwashing with soap and water before and after eating.
- prompt cleaning of eating and food-preparation surfaces.
- designated seating or supervision where justified by a risk assessment.
- controls on food sharing, utensils and drinks.
- ingredient checks and management of substitutions.
- age-appropriate education about allergies and respectful behaviour.
- alternatives for cooking, science, art, sensory play or animal-related activities.
- arrangements for packed lunches, snacks, celebrations and fundraising events.
- reasonable controls on identified allergens where clinically justified.
- prevention of bullying, teasing, deliberate exposure or misuse of medication.
- Hand sanitiser alone should not be relied upon to remove food allergens.

Catering

The College and catering provider will:

- retain current information about pupils with food allergies.
- comply with applicable allergen-information requirements.
- have procedures for purchasing, receiving, storing, preparing and serving food.
- prevent avoidable cross-contact through cleaning, separation and suitable utensils.
- manage recipe or ingredient substitutions safely.
- ensure relevant catering staff receive appropriate training.
- maintain a reliable method of identifying the correct pupil and correct meal.
- never guess whether food is safe where accurate information is unavailable.

The College will not require a pupil to accept food where its allergen status cannot be established.

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Medication and Adrenaline Auto-Injectors (AAI)

The College holds a medication cabinet, within the Student Services office, where antihistamine medication is stored. An AAI is also stored in the Student Services Office, in a clear labelled first aid kit, which states **"EPIPEN/INHALER"**. The first aid box is located straight as you enter the office on the wall. All staff are made aware of the location during their Induction and further Medication Training.

A pupil's own prescribed auto-injector should normally be used first when available and suitable. Spare stock may be used where permitted by current law and guidance, including where the pupil's own device is unavailable, faulty, out of date or insufficient, or where emergency use is otherwise authorised.

Recognising anaphylaxis

Anaphylaxis may develop rapidly. Signs can include:

- difficulty breathing, wheezing, persistent coughing or noisy breathing.
- swelling or tightness of the throat, tongue or upper airway.
- difficulty swallowing, a hoarse voice or inability to speak normally.
- pale, clammy skin, sudden drowsiness, confusion, collapse or loss of consciousness.
- dizziness or signs of low blood pressure.
- in infants or younger children, sudden floppiness or unusual quietness.

Skin symptoms such as hives, flushing or swelling may occur, but **anaphylaxis can happen without a rash**. Where anaphylaxis is suspected, staff must treat it as an emergency. They must not delay adrenaline while waiting for parental permission, a rash, further symptoms or confirmation from a colleague.

EMERGENCY PROCEDURE

When anaphylaxis is suspected, staff must:

1. **Administer adrenaline immediately** into the outer mid-thigh, following the device instructions. It may be administered through clothing if necessary.
2. **Call 999 immediately**, state "anaphylaxis" and give the school's exact location.
3. Send someone to meet the ambulance and contact the College office and parent or carer.
4. Keep the pupil lying flat with legs raised, if possible. If breathing is difficult, allow the pupil to sit with legs extended. A pregnant person should lie on their left side.
5. Do not allow the pupil to stand, walk or suddenly sit up, even if they appear to recover.
6. If symptoms persist or return, give a second adrenaline dose after **five minutes**, using another device.
7. Commence CPR if the pupil is unresponsive and not breathing normally.
8. Remain with the pupil and hand the used devices and relevant healthcare information to ambulance staff.
9. Ensure the pupil is medically assessed in hospital. The pupil must not simply return to class following adrenaline administration.

When in doubt, staff should administer adrenaline. Prompt use is safer than delaying treatment for suspected anaphylaxis.



College Trips and Off-Site Activities

A pupil will not normally be excluded from an activity solely because of an allergy. A written risk assessment will consider:

- travel, accommodation, meals and access to emergency services.
- the pupil's own medication and suitable spare devices.
- staff competency and allocation of responsibility.
- medication storage and immediate accessibility.
- communication with venues, caterers and transport providers.
- mobile-phone coverage and the precise location for emergency services.
- arrangements for overseas travel, including local emergency numbers and medical documentation.

Emergency medication must remain with the pupil or supervising adult and must not be left on a coach, in inaccessible luggage or in a distant office.



Appendix A – Implementation Checklist

Requirement	Completed/evidence
Policy approved, published and communicated	☐
Named senior allergy lead appointed	☐
Allergy register checked and updated	☐
Individual Healthcare Plans completed	☐
All staff training completed and recorded	☐
Catering staff and contractors briefed	☐
Spare auto-injectors purchased	☐
Storage points identified and communicated	☐
Monthly stock and expiry checks established	☐
Emergency notices displayed	☐
Trip procedures updated	☐
Incident and near-miss process established	☐
Annual review scheduled	☐