THAMESFIELD COLLEGE

CHANGING LIVES | CREATING FUTURES

Allergy and Anaphylaxis Policy

Safe. Prepared. Inclusive.

For implementation from September 2026

Policy statement

This policy sets out how Thamesfield College supports pupils with allergies, ensures emergency responses are clear, and enables pupils to take part fully and safely in school life.

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Allergy and Anaphylaxis Policy

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Thamesfield statement
Thamesfield College supports pupils with allergies by ensuring clear allergy action plans, accessible medication, trained staff and inclusive planning for lessons, food-related activities and trips.

Document control information

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Contents

- 1. Introduction
- 2. Roles and responsibilities
- 3. Allergy Action Plans
- 4. Emergency Treatment and Management of Anaphylaxis
- 5. Supply, storage and care of medication
- 6. Spare' adrenaline auto-injectors in school
- 7. Staff Training
- 8. Inclusion and safeguarding
- 9. Catering
- 10. School trips
- 11. Allergy awareness and food restrictions
- 12. Staff food and provision of food to pupils
- 13. Risk assessment
- 14. Useful links

Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens. Common UK Allergens include (but are not limited to):-

Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how Thamesfield College will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

Roles and responsibilities

Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform reception staff/ /SENCO/A member of SLT at the joining interview. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional
- e.g. GP/allergy specialist.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

- All staff will complete anaphylaxis training. Training is provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.
- Staff (regular or cover classes) must be aware of the pupils in their care who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

- The School Administration team will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date however the school admin team will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- The school admin team keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given.
- First Aiders ensures that any reaction or near misses is recorded and reported internally or in accordance with RIDDOR.

▪ Staff must comply with the food restrictions, approval requirements and reporting duties in the section on staff food and provision of food to pupils.

Pupil Responsibilities

- Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- Pupils who are trained and confident to administer their own AAIs will be encouraged to take responsibility for carrying them on their person at all times.

Allergy Action Plans

Allergy action plans are designed to function as individual healthcare plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto- injector.

British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans are produced by a medical professional and should not be created by school. These are a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK. The allergy action plans are designed to function as an individual healthcare plan.

Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen. Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.

- CIRCULATION - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more severe reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction. Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. Adrenaline is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

As soon as anaphylaxis is suspected, adrenaline must be administered without delay. Action:

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD FLAT WITH LEGS RAISED – they can be propped up if struggling to breathe but this should be for as short a time as possible.**
- **USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY and note the time given. AAIs should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.**
- **CALL 999 and state ANAPHYLAXIS (ana-fil-axis).**
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

Supply, storage and care of medication

Depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to carry their own two AAIs on them at all times in a suitable bag/container.

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept within 5 minutes of them, not locked away and accessible to all staff.

Medication should be stored in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain:

- Two AAIs i.e. EpiPen® or Jext®

- An up-to-date allergy action plan
- Antihistamine as tablets or syrup (if included on allergy action plan)
- Spoon if required
- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the School Admin team will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

Older children and medication

Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on very suddenly, so school staff need to be prepared to administer medication if the young person cannot.

Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a clinical waste contractor. The sharps bin is kept in the medical room at Hersham and the staff toilet at Staines.

Spare' adrenaline auto-injectors in school

Thamesfield College has purchased spare AAIs for emergency use in children who are risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date) or are experiencing anaphylaxis for the first time.

These are stored in the reception area at both sites with the first aid kit's, clearly labelled 'Emergency Anaphylaxis Adrenaline Pen', kept safely, not locked away and accessible and known to all staff. Thamesfield College holds two spare pens which are kept in the following location/s:-

- Staines Reception
- Hersham Staffroom

The School Admin Team are responsible for checking the spare medication is in date on a monthly basis and to replace as needed. Written parental permission for use of the spare AAIs is included in the pupil's allergy action plan.

Staff Training

The named staff members (at least 2) responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:-

- Sarah Huff
- Amy Young

All staff will complete allergy and anaphylaxis training annually, and on an ad-hoc basis during induction of new staff.

Training includes:

- Knowing the common allergens and triggers of allergy
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
- Administering emergency treatment (including AAIs) in the event of anaphylaxis – knowing how and when to administer the medication/device
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance, knowing who is responsible for what
- Managing allergy action plans and ensuring these are up to date

Thamesfield College ensures that staff undertake a practical session using trainer devices.

Staff briefings and induction will include the school's food restrictions, label checks, approval arrangements and incident reporting. The school will retain records of training completion and policy acknowledgement.

Inclusion and safeguarding

Thamesfield College is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Catering

The school must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

A member of SLT and admin staff will inform the Food Technology teacher of pupils with food allergies.

Parents/carers are encouraged to meet with the school to discuss their child's needs.

The school adheres to the following Department of Health guidance recommendations:

- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager.
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

School trips

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

Overnight school trips should be possible with careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (if provided by the venue).

Sporting Excursions

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation. The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team. If another school feels that they are not equipped to cater for any food-allergic child, the school will arrange for the child to take alternative/their own food.

Most parents are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

Allergy awareness and food restrictions

Thamesfield College operates an allergy-aware approach. The school cannot guarantee an allergen-free environment. Food restrictions support, but do not replace, individual risk assessments, allergy action plans, staff training, cleaning and emergency preparedness.

Known nut allergies on site require clear precautions. The staff restrictions below apply at both sites and during school-organised activities. Parents, pupils, visitors and contractors will be informed of the food restrictions relevant to them. Additional restrictions for other allergens will be specified through individual risk assessments and communicated to those who need to implement them.

Staff food and provision of food to pupils

These requirements apply to all employees, including temporary and agency staff, and to volunteers working with pupils. The Headteacher is responsible for implementation and may nominate a member of SLT to approve food provision.

Personal food and allergen restrictions

▪ Staff must not bring, store, prepare or eat peanuts, tree nuts or foods containing them as ingredients on either school site or during school-organised activities. This includes personal lunches and snacks, staffrooms, offices, classrooms, kitchens, shared refrigerators and school transport.

▪ Staff must check the actual product label each time. Products labelled “may contain” peanuts or tree nuts must not be supplied to pupils unless their suitability has been established under the pupil’s individual

healthcare plan and risk assessment. For personal staff food, any additional restrictions on precautionary-labelled products must be recorded in the site or individual risk assessment and communicated to staff. If unsure, staff must seek advice before bringing the product on site.

▪ Staff must follow all additional allergen controls specified in individual or site risk assessments. There is no blanket prohibition on every allergen; controls must reflect the identified risk.

▪ Food must be stored securely and handled so that allergens are not transferred to shared surfaces, equipment or pupils' food. Staff must wash hands with soap and water after handling food and clean affected surfaces and utensils appropriately.

Giving food to pupils

▪ Staff must not give pupils personal food, drinks, sweets, chocolate, treats or food rewards outside a school-approved arrangement. This includes informal gifts, celebrations, lesson activities and trips.

▪ The Headteacher or nominated member of SLT must approve the arrangement in advance. Routine school meals, snacks or curriculum activities may operate under a documented standing approval identifying the responsible staff and required checks.

▪ Before food is provided, the responsible staff member must check the intended pupil's current allergy action plan and risk assessment, the ingredients and precautionary warnings on the actual packaging, and the arrangements to prevent cross-contamination. School approval or a pupil's reassurance does not replace these checks. Any parental or clinical advice required by the pupil's plan must be obtained.

▪ Original packaging or complete, reliable ingredient and allergen information must remain available until the food has been served. Where ingredients, warnings or suitability cannot be established, the food must not be given. Products must be checked each time because recipes and labelling can change.

▪ Staff must discourage food sharing between pupils and supervise food-related activities in line with the risk assessment. A suitable alternative should be planned so that pupils with allergies can participate safely.

Training and reporting

▪ Staff must complete required allergy and adrenaline auto-injector training and read the precautions for pupils in their care. Training completion and acknowledgement of this policy must be recorded. Emergency medication and training do not remove the need to prevent exposure.

▪ Any suspected exposure, unsafe food provision, breach of restrictions or near miss must be reported promptly to a member of SLT and recorded through the school's incident-reporting arrangements. Where a reaction is suspected, staff must follow the pupil's allergy action plan and the emergency procedure immediately; reporting must not delay treatment.

▪ SLT will ensure appropriate parent/carer notification, review the incident and risk controls, and communicate any revised precautions to relevant staff. Safeguarding concerns must also be referred through the school's safeguarding procedures.

Compliance and implementation

Failure to follow these requirements, an individual allergy precaution or a reasonable safety instruction may be considered under the school's disciplinary procedure. A deliberate serious breach of health-and-safety requirements or gross negligence causing or risking serious harm may amount to gross misconduct. Each allegation will be investigated and assessed on its facts under the procedure in force; no outcome is automatic.

The revised requirements take effect from July 2026. The Headteacher will brief staff, provide access to the policy and record acknowledgement, including for new and temporary staff. Earlier incidents must be assessed against the rules, duties and instructions applicable at the time.

Risk Assessment

Thamesfield College will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping allergic children safe. Risk assessments must identify relevant allergens, food and environmental controls, named responsibilities and any restrictions on precautionary-labelled products. They must be reviewed when needs change and after an incident or near miss. Staff must be informed promptly of changes affecting their work.

Useful Links

- Anaphylaxis UK - https://www.anaphylaxis.org.uk/
- Safer Schools Programme - https://www.anaphylaxis.org.uk/education/safer-schools-programme/
- AllergyWise for Schools online training - https://www.allergywise.org.uk/p/allergywise-for-schools1
- Allergy UK - https://www.allergyuk.org
- Whole school allergy and awareness management - https://www.allergyuk.org/schools/whole-school-allergy-awareness-and-management
- BSACI Allergy Action Plans - https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/
- Spare Pens in Schools - http://www.sparepensinschools.uk
- Department for Education Supporting pupils at school with medical conditions - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf
- Department of Health Guidance on the use of adrenaline auto-injectors in schools - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016) https://www.nice.org.uk/guidance/qs118