



Allergy Policy

Prepared by: The Central Team

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1. INTRODUCTION

Life Skills Enterprise School is owned and operated by Cavendish Education.

This policy is one of a series of school policies that, taken together, are designed to form a comprehensive statement of the school's aspiration to provide an outstanding education for each of its students and of the mechanisms and procedures in place to achieve this. Accordingly, this policy should be read alongside these policies. In particular, it should be read in conjunction with the policies covering equality and diversity, Health and Safety, safeguarding and child protection.

All of these policies have been written, not simply to meet statutory and other requirements, but to enable and evidence the work that the whole school is undertaking to ensure the implementation of its core values: At Life Skills Enterprise, our ethos is to provide a wholesome curriculum combining core academic learning with skills for life, so pupils can flourish, become increasingly independent and prepare successfully for adulthood.

While this current policy document may be referred to elsewhere in Life Skills Enterprise School documentation, including particulars of employment, it is non-contractual.

In the school's policies, unless the specific context requires otherwise, the word "parent" is used in terms of Section 576 of the [Education Act 1996](#), which states that a 'parent', in relation to a child or young person, includes any person who is not a biological parent but who has parental responsibility, or who has care of the child. Department for Education guidance [Understanding and dealing with issues relating to parental responsibility updated August 2023](#), considers a 'parent' to include:

- all biological parents, whether they are married or not
- any person who, although not a biological parent, has parental responsibility for a child or young person – this could be an adoptive parent, a step-parent, guardian or other relative
- any person who, although not a biological parent and does not have parental responsibility, has care of a child or young person

A person typically has care of a child or young person if they are the person with whom the child lives, either full or part-time, and who looks after the child, irrespective of what their biological or legal relationship is with the child.

The school contracts the services of third-party organisations to ensure regulatory compliance and implement best practices for:

- HR and Employment Law
- Health & Safety Guidance
- DBS Check processing
- Mandatory Safeguarding, Health & Safety, and other relevant training
- Data protection and GDPR guidance
- Specialist insurance cover

Where this policy refers to 'employees', the term refers to any individual who is classified as an employee or a worker, working with and on behalf of the school (including volunteers and contractors).

The school is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers, pupils and visitors to share this commitment.

All outcomes generated by this document must take account of and seek to contribute to safeguarding and promoting the welfare of children and young people at Life Skills Enterprise School.

The policy documents of Life Skills Enterprise School are revised and published periodically in good faith. They are inevitably subject to revision. On occasions, a significant revision, although promulgated in school separately, may have to take effect between the republication of a set of policy documents. Care should therefore be taken to ensure, by consultation with the Senior Leadership Team, that the details of any policy document are still effectively current at a particular moment.

2. AIMS

Life Skills Enterprise has regard to the Department for Education's 2026 allergy safety guidance as good practice for its independent specialist setting. Allergy risks are identified on admission and reviewed with families and health professionals; staff training, individual healthcare planning, emergency response and learning from incidents or near misses are proportionate to identified need.

Life Skills Enterprise has regard to the Department for Education's Allergy safety in schools guidance published in July 2026 and the statutory guidance on supporting pupils with medical conditions. Although the 2026 allergy guidance is not yet a statutory requirement for independent schools, LSE uses it as a best-practice framework appropriate to an independent specialist school.

This policy aims to reduce the risk of exposure to allergens, set out emergency procedures, ensure the wellbeing and inclusion of pupils with allergies, and maintain allergy awareness across the school community.

3. 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](#)

4. ROLES AND RESPONSIBILITIES

The Governing Body/Directors

The governing board is responsible for ensuring:

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

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

Allergy safety lead

Kim Ochs, First Aid Lead, is the operational allergy safety lead, with oversight from Headteacher Paul Barrett. Responsibilities include implementing and reviewing this policy; maintaining current allergy information and Individual Healthcare Plans (IHPs); ensuring allergy action plans and staff training are up to date; coordinating risk assessments and emergency arrangements; and reviewing serious incidents or near misses to identify learning.

Headteacher

Paul Barrett is responsible for strategic oversight of allergy safety, ensuring appropriate resources and training are available, and deciding with parents/carers and relevant healthcare professionals whether an IHP is required.

Spare adrenaline devices

Kim Ochs and a trained member of staff designated by the Headteacher are responsible for checking spare adrenaline auto-injectors (AAIs) monthly, monitoring expiry dates and arranging replacement devices when required.

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

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

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

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.

5. 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

Identifying pupils at risk

For new starters, parents/carers are asked to provide medical and allergy information before the pupil starts. Where a pupil receives a new diagnosis or joins mid-year, arrangements are put in place promptly. Parents/carers are asked to update medical information at least annually and whenever needs change. Updates can be provided to the school office on 01843 260315 or office@lifeskillsenterprise.co.uk.

Identifying staff and visitors at risk

New staff are asked to disclose relevant allergies through appropriate confidential employment/health processes. Visitors are asked to alert the school to relevant allergies where this is necessary for their safety during the visit.

Individual healthcare plans (IHP)

Pupils should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment
- They are at risk of harm as a result of their allergy; and
- Require 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 headteacher 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.

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 a 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.

Register of pupils with known allergies

The school maintains a register of pupils who have a known allergy. The register 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 is kept securely in the school's medical information systems and in an accessible emergency summary for authorised staff and can be checked quickly by any member of staff as part of initiating an emergency response

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

6. ASSESSING THE RISK

Hygiene procedures

Pupils are reminded to wash their hands before and after eating

Sharing of food, food containers, and food utensils is not allowed

Pupils have their own named water bottles, and lunch boxes provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended

Where food is not directly provided by the school, parental engagement and permission will be sought in advance

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

Insect bites/stings

When outdoors:

Shoes should always be worn

Food and drink should be covered

Animals

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

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 9.5)

7. PROCEDURES FOR HANDLING AN ALLERGIC REACTION

All staff are trained to recognise mild and severe allergic reactions, including anaphylaxis, and to respond promptly. A pupil's allergy action plan must be followed. Emergency services will be called where anaphylaxis is suspected and adrenaline administered without delay in accordance with the action plan, device instructions and current guidance. Parents/carers will be contacted as soon as practicable.

8. ADRENALINE DEVICES (ADs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, set out your school's procedures for ADs, covering these areas:

Prescribed ADs

Pupils who are prescribed adrenaline auto-injectors (AAIs) should have rapid access to them at all times, including during lessons, break and lunch, PE, visits and off-site activities. Where a pupil is able to carry their own device safely, this will be supported in accordance with their Individual Healthcare Plan and allergy action plan.

Where a pupil does not carry their own AAIs, prescribed devices will be stored in the designated medical/emergency medication area. This location is unlocked or immediately accessible to authorised staff, is communicated to all relevant staff and is no more than a short distance from the pupil during the school day.

Devices are stored at room temperature, protected from direct sunlight and extremes of temperature, and checked regularly for expiry. Parents/carers remain responsible for supplying prescribed medication and replacements when requested.

For off-site activities, the visit leader checks before departure that prescribed AAIs and the pupil's allergy action plan are available and that a trained member of staff is able to respond in an emergency. Records of prescribed and emergency medication are maintained securely by the school.

Spare ADs and inhalers

Kim Ochs, First Aid Lead and operational allergy safety lead, is responsible for ensuring any spare adrenaline auto-injectors (AAIs) held by the school are appropriate for the identified pupil population, stored securely but readily accessible to trained staff, checked at least monthly and replaced before expiry.

The number, dose and brand of spare devices held will be determined from current pupil medical information, individual allergy action plans, manufacturer instructions and relevant national guidance.

Spare AAIs are stored in the designated medical/emergency medication area.

Their location is communicated to staff and included in emergency arrangements. Where the school holds an emergency asthma reliever inhaler, equivalent checking and storage arrangements apply.
A suitable spare device and the relevant allergy action plan will accompany an off-site group when indicated by the individual risk assessment and current guidance.

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).

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.

Use of adrenaline devices off school premises

Pupils at risk of anaphylaxis who can safely carry and administer their own prescribed device should have it available on school trips and off-site activities. The visit leader will check individual medical arrangements before departure.

Where the school holds spare AAIs, an appropriate spare device and the relevant action plan will accompany the group when indicated by risk assessment, with a trained member of staff responsible for access to it.

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.

Both require recording on the **Serious Incident Notification form**

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.

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. For pupils aged 16 and over, the school will consider the pupil's wishes and safeguarding needs when sharing information with parents/carers.

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 Kim Ochs, First Aid Lead. 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.

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

With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalisation. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. in accordance with RIDDOR requirements
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

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

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it

- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist

- Understand the difference between food allergy, coeliac disease and food intolerance

- Know where to find information on allergy triggers

- Can identify the range of symptoms of allergic reactions

- Understand and can recognise anaphylaxis

- Know how to respond in an emergency, including:

 - Calling emergency services and informing parents/carers

 - How to locate and administer emergency medication

 - How to use the medication/device in an emergency

- Understand the impact allergy can have on a 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')

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.

Pupils are taught age-appropriate allergy awareness through PSHE, health education and relevant practical activities.

11. WELLBEING

Pupils with allergies may experience anxiety, exclusion or bullying related to their condition. LSE will provide pastoral support, regular check-ins through the pupil's class team, reasonable adjustments and clear reassurance about risk-reduction and emergency arrangements. Any bullying will be addressed through the Behaviour and Anti-Bullying policies.

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. LINKS WITH 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
- Behavior policy

14. MONITORING, APPROVAL & POLICY REVIEW

This policy will be monitored by the allergy safety lead.

This Policy has been reviewed and approved by:

Policy Approver(s)	Cavendish Education Board of Directors/Senior Leadership Team of the school
Storage Location	Website, online, hard copy in the school
Effective Date	August 2026
Next Review Date	August 2027

15. REVISION HISTORY

Version	Change	Author	Date of Change
1	First published	Cavendish Central Team	August 2026