



HET Allergy Policy

Southampton Hospital School

Reviewed on	May 26	Review frequency	3 yearly
Next review due	May 29	Template Yes / No	Yes
Owner	Head of Estates	Approved by	Executive

Reviewed and amended by SHS September 2026

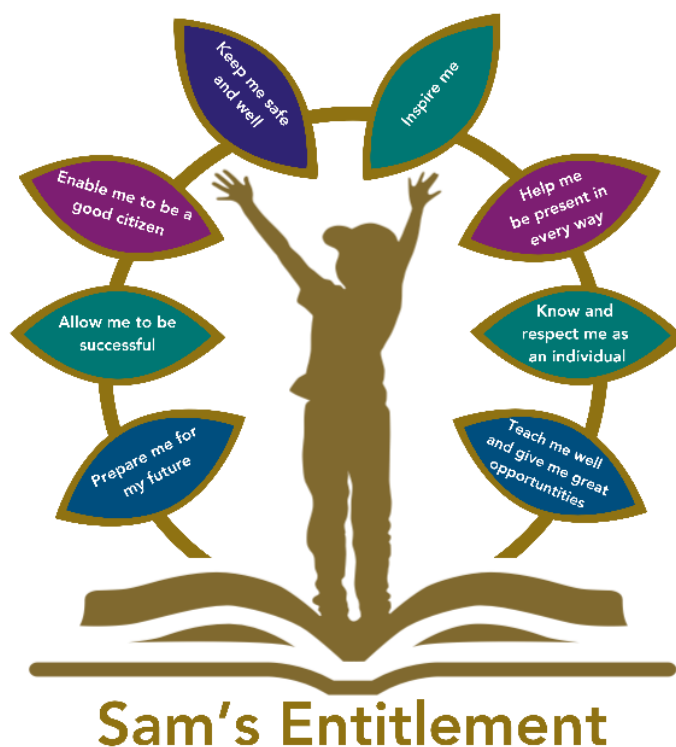


1. History of Policy Changes

Date	Page	Change	Origin of Change
May 26		New template policy	N/A

2. Contents

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3. Introduction

Hamwic Education Trust (HET) believe that all pupils should receive a high quality, enriching, learning experience in a safe and inclusive environment, which promotes excellence through a broad curriculum that prepares them for their future and opens doors to a diverse array of opportunities as well as that all pupils and adults within HET flourish as individuals and together.

4. Definitions

- 'Local Governing Committee' in this policy, where reference is made to the Governing Committee, this means the Local Governing Committee of the school, or the Trust in the case of a school where no Local Governing Committee is present. Where a Governing Committee is not present in a school, or numbers are low, Governors from other schools/partnerships may be used.
- 'Manager' in this policy, is anyone as identified in the staffing structure with line management responsibilities.

5. Scope

This policy applies to:

- All pupils with diagnosed or suspected allergies
- All staff (including supply staff)

- Volunteers, contractors and third-party providers

6. Statement of Intent

Southampton Hospital School is committed to ensuring the safety, inclusion and wellbeing of pupils with allergies using a whole school approach to health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies.

We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way. By our actions we will work proactively to:

- Minimise the risk of exposure within the school setting.
- Encourage self-responsibility.
- Learn avoidance strategies.
- Have robust plans for an effective response to possible emergencies.
- Ensure inclusivity for all pupils

We will comply with all relevant environmental legislation, regulations and requirements.

- To encourage proactive steps to keep pupils/students safe.
- To ensure pupils/students from diverse backgrounds, ethnicities or diverse cultural heritages are not disadvantaged when dealing with allergies and food labelling.
- To collaborate with the catering provider/team to establish a robust process and documentation for menu planning, food labelling, storing, avoidance of cross-contamination, stock ordering of food/drink used at the school
- To provide an effective staff awareness programme on food allergies and intolerances, possible symptoms (anaphylaxis) recognition and actions to take.
- To develop a pupil awareness programme through PHSE and other curriculum areas

Allergy management is treated as a whole-school safeguarding responsibility, and effective arrangements are in place to prevent allergic reactions and to respond rapidly and safely to emergencies.

This policy meets the expectations set out in the draft statutory guidance on supporting pupils with medical conditions (March 2026).

7. Equality Statement

Our school is clear about the need to actively support pupils with medical conditions to participate in school life.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all aspects of school life.

Risk assessments will be conducted so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included.

In doing so, pupils, their parents and any relevant healthcare professionals will be consulted



8. Context

Food allergies are increasing in both developed and developing countries, especially in children and the severity and complexity of food allergy is also increasing. Food allergy can be fatal, and an appropriate diagnosis is essential in parallel with the need for clear food labelling worldwide.

Around 5-8% of children in the UK live with a food allergy and most school classrooms will have at least one allergic pupil. These young people are at risk of anaphylaxis, a potentially life-threatening reaction which requires an immediate emergency response. 20% of severe allergic reactions to food happen whilst a child is at school, and these reactions can occur in children with no prior history of food allergy. It is essential that staff recognise the signs of an allergic reaction, symptoms and are able to manage it safely and effectively.

Schools have a legal duty to support pupils with medical conditions, including allergy.

9. Principles

- To comply with all relevant environmental legislation, regulations and requirements.
- To encourage proactive steps to keep pupils/students safe.
- To ensure pupils/students from diverse backgrounds, ethnicities or different cultural heritages are not disadvantaged when dealing with allergies and food labelling.
- To work with the catering provider/team to establish, a robust process and documentation for menu planning, food labelling, storing, avoidance of cross-contamination, stock ordering of food/drink used at the school.
- To provide an effective staff awareness programme on food allergies and intolerances, possible symptoms (anaphylaxis) recognition and actions to take.
- To develop a pupil awareness programme through PHSE and other curriculum areas.

10. Practical Steps

In order to put these principles into practice we will:

Governors

- Ensure the school has a strategic vision for the management of allergy risk assessment and emergency procedures
- Delegate the day-to-day responsibility for the effective delivery of this policy to the school leader.
- Ensure the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy, are robust and effective.
- Ensure that the school provides appropriate training, information, instruction, induction, and supervision on a regular basis to enable everyone to stay safe regarding allergies and their management. It is good practice to log all training and attendees.
- Ensure adequate resources for managing allergies are available.
- Ensure appropriate material is available on the school website for parent/carers highlighting how the school is managing pupils/students with allergies.
- Monitor the effectiveness of this policy to ensure it remains fit for purpose and approves and reviews this policy annually.
- This policy will be reviewed immediately following any serious incident or near miss by the school leader and a member of the managed services safeguarding and H&S teams.

School Leader

- Provide, as far as practicable, a safe and healthy environment in which people at risk of allergic reaction and anaphylaxis can participate equally in all aspects of school life and are not subject to bullying because of their condition.
- Ensure all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitment to allergy management as part of safeguarding training and school induction.
- Ensure the curriculum contains age-appropriate content so all pupils/students can learn about allergies and how everyone can support those who have them.
- Ensure that up to date allergy information for pupils/students is accessible to catering teams. This will be the responsibility of the school leader who may delegate to a member of SLT and or the Business/Operations Managers. However, this will form part of the managed services safeguarding and/or H&S audit.
- Ensure there is a workable school emergency plan in place that is known by all staff.
- Ensure the school sends a copy of the medical details it holds for the child to parents/carers for review and update at the end of each school year. Seek updated medical information at the commencement of each calendar year and for any pupil/student joining in-year.
- Where the pupil/student has an Individual Healthcare Plan (IHP), ensure the involvement of healthcare and welfare professionals, teaching and catering staff, parents/carers, and the pupil/student in establishing IHCPs.
- Encourage parents/carers to provide Allergy Action Plans (AAPs) completed and signed by a healthcare professional that can be kept with their medication with copies made available for all staff to access and help the school support the pupil/student.
- Ensure effective communication of individual pupil medical needs to all staff and that they know how and where to check for updated information.
- Ensure there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff absences away from the school premises.
- Ensure First Aid staff training includes anaphylaxis management, including awareness of triggers, anaphylaxis and first aid emergency procedures.
- Ensure an adequate risk assessment is undertaken prior to any school trips, excursions or off-site extra-curricular activities for pupils/students who have allergies (evolve).
- Ensure records of pupils/students medically prescribed an AAI and its use are kept correctly.
- Ensure pupil/student documentation and in date medication is kept correctly and safely.
- Ensure best practice in the labelling of foodstuffs and their contents.
- Report to the governors regarding the management of allergies within the school
- The Trust safeguarding and H&S audits will be responsible for ensuring procedures within this policy are adhered to and will form part of the audit reports.

Member(s) of staff responsible for medical needs

- Follow all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context
- Report to the school leader regarding pupil/student allergies
- Lead on the training of staff regarding allergy medical needs and their identification and management.

- Liaise with parents/carers of pupils/students with known declared allergies to produce a risk assessment for their child that includes sharing of information. Allergy management, risk minimisation, and emergency actions.
- Wherever possible use an AAP (allergy action plan) for pupils with recognised allergies and keep it with their medication. Ensure copies of the AAP (allergy action plan) are available for all staff to access.
- If an additional written IHCP is not required, ensure that the AAP is viewed and treated with the same level of seriousness.
- Ensure all copies of the AAP/IHCP located around the school and/or on IT systems are identical if any updated version is received.
- Where an AAP has not been received for a pupil with recognised allergies, or if the medication information is not clear, liaise with UHS staff/GP/school nursing team, to obtain an up-to-date copy and/or clarification.
- Be trained in the use of an Adrenaline Auto-injector (AAI) and be competent in performing any possible required prescribed medical treatment as outlined in the pupil's/student's IHP and/or AAP.
- Ensure that any other staff involved with those pupils/students requiring the use of an AAI are also adequately trained and competent.
- Ensure all school trips, excursions or off-site extra-curricular activities for pupils/students are pre-checked so that "safe" food is provided or that an effective control is in place to minimise risk of exposure for pupils with allergies.
- Ensure the school has an audited spare supply of in date AAIs (Adrenaline Auto-injector) that are kept in a safe space at room temperature that is accessible, secure but not locked away and all staff are aware of the location.
- Monitor the use of all AAIs (adrenaline Auto-injector) to ensure they are within the expiry date including those brought into the school by pupils/students or external sources and are of the correct dosage.
- Arrange for the correct disposal of out-of-date AAIs.
- Where anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state ANAPHYLAXIS is suspected, then follow their advice as to whether administration of a spare AAI is appropriate.
- Record all emergency uses of AAIs or reports of suspected emergencies.
- Ensure that, if a pupil/student notifies school that they are no longer allergic to a food, this information is checked prior to updating records and the IHCP (if applicable)

All Staff

- Follow as directed all the requirements of the school, including all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context.
- Complete appropriate anaphylaxis training and be confident to respond to an allergy emergency.
- Raise awareness about allergies and anaphylaxis amongst their pupils/students in the classroom and around school, especially in dining areas.
- Encourage self-responsibility and learned avoidance strategies amongst pupils/students living with allergies.
- Help all pupils/students understand which foods are safe for those with allergies and how they can support other pupils/students with specific dietary needs to stay safe.



- Highlight the need for anti-bullying of pupils/students with the condition.
- Be aware of the pupils in their care (including regular cover classes) who have known allergies as an allergic reaction could occur at any time, not just at breaks or mealtimes.
- Any food-related activities must be supervised with due caution whilst following best practice for storing, preparing, cooking and serving food.
- Any staff leading on a school trip must check that all pupils/students with medical conditions, including allergies, are carrying their medication (those unable to produce their required medication would not be able to attend the excursion).
- Staff leading a school trip, excursion or off-site extracurricular activity must ensure they carry all relevant emergency supplies with them.

Parents/Carers

- Notify the school of the pupil's/student/s allergies.
- Inform the school of any changes as soon as known.
- Talk with your child about allergy self-management, including what foods are safe and unsafe, how to read food labels, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult if experiencing an allergic reaction.
- Provide an AAP (allergy action plan) completed by a healthcare professional that can be kept with their medication and help the school support the pupil/student.
- Contribute to the provision of an IHCP in partnership with the school, and relevant healthcare professional, where required.
- Provide any other written medical documentation, instructions and medications as directed by a health professional.
- If you require it, meet with the Catering/Chef Manager and school to discuss any specific requirements relating to your child's allergy (information from these meeting will be recorded by the school).
- Be aware of the school Allergy Policy and any arrangements for managing children with allergies and at risk of anaphylaxis.
- Communicate regularly with the school to support our ability to keep our children, safe and act immediately in the event of an allergic reaction.
- Provide appropriate in date medication (two AAIs) of the correct dosage.
- Providing appropriate foods to be consumed by the child if necessary.
- Replace medications after use or upon expiry.

Pupil/Student with allergies (as age appropriate)

- Have a good awareness of their allergy and support the knowledge of peers in helping keep them safe
- Be proactive in the care and management of their food allergies and reactions and medication.
- Be sure not to exchange food with others and take care to avoid any foods which may cause an allergic reaction.
- Read food labelling but, if unsure, avoid the food
- Avoid eating anything with unknown ingredients
- Know where their medication is kept and (if age appropriate and confident enough to administer their own auto-injectors) take responsibility for carrying AAIs on their person at all times
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult

11. 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 safely, not locked away and accessible to all staff.

In all cases, arrangements relating to the storage, carriage and administration of AAIs will be determined through individual risk assessment and will take account of the pupil's age, level of understanding, medical advice, and the requirements of the educational setting.

Bursledon House

All medication for inpatients is stored and managed by University Hospital Southampton (UHS) staff in accordance with hospital procedures. Where appropriate, older pupils may carry their own Adrenaline Auto-Injector (AAI) and other prescribed emergency medication to promote independence and ensure timely access. This will be determined by UHS clinical staff and discussed with the pupil and their family on admission and reviewed during ward rounds as necessary. This information is then shared with school staff and recorded on the child's IHCP.

When educational visits or off-site activities take place, arrangements regarding the storage and carriage of AAIs will be subject to an individual risk assessment undertaken in collaboration with UHS staff. A member of the nursing or therapy team will accompany all trips alongside school staff to ensure appropriate medical support is available.

School staff may administer an adrenaline auto-injector (AAI) in an emergency if no UHS staff are immediately available. Following administration, call extension 222 and clearly state that the pupil is experiencing an allergic reaction, providing details of the allergy and confirming that an AAI has been administered. At the same time, a second member of school staff should be designated to locate and alert UHS clinical staff without delay.

G Level

Pupils receiving treatment on G Level do not routinely have access to personal AAIs within the ward environment. AAIs are designed for emergency use outside of a hospital setting to provide sufficient adrenaline until the individual can access specialist medical treatment.

In the event of a suspected anaphylactic reaction within the hospital, the established UHS emergency response procedures will be followed. School staff will immediately activate the emergency crash call system. Anaphylaxis medication and emergency equipment are available within the ward's crash trolley, and adrenaline will be prepared and administered by appropriately trained medical professionals. School staff will not administer adrenaline in these circumstances and will instead initiate the hospital emergency response procedure.

Outreach Provision

For pupils receiving education within the home who have been prescribed an AAI, teaching staff must ensure that an in-date AAI is available and readily accessible within the room where teaching is taking place. Where appropriate, pupils may retain responsibility for carrying their own AAI to promote independence; however, it must remain immediately accessible throughout the session. A Risk Assessment and IHCP will be completed with the student and parent before sessions commence.

A parent or carer routinely remains present within the home for the duration of all teaching sessions.



Where teaching takes place in a public setting, staff must ensure that the pupil has access to and is carrying their prescribed AAI at all times. For younger children who are not able to carry or manage their own medication independently, the parent or carer must hand the AAI directly to the teacher before the session can commence. If an AAI is not provided or carried, the lesson can not take place.

Following an individual risk assessment, parents or carers may be required to provide a second AAI for the duration of the teaching session. Any additional medication must be supplied in a clearly labelled, sealed container displaying the pupil's full name. The container must include all medication and documentation required to respond appropriately in the event of an allergic reaction, in accordance with the pupil's Allergy Action Plan (AAP).

The labelled container may include:

- Two Adrenaline Auto-Injectors (AAIs), such as EpiPen® or Jext®;
- A current and up-to-date Allergy Action Plan (AAP);
- Antihistamine medication (tablets or syrup), where specified within the Allergy Action Plan;
- A spoon or dosing device, where required for the administration of liquid medication;
- An asthma reliever inhaler, where specified within the Allergy Action Plan.

All medication must be in date, clearly labelled, and readily accessible throughout the teaching session. Staff must be familiar with the contents of the medication container and the emergency procedures detailed within the pupil's Allergy Action Plan before teaching commences.

Teaching sessions will not proceed if a pupil who is required to have an AAI does not have access to one at the start of the session.

Where outreach teaching takes place within a pupil's registered mainstream or specialist school, outreach staff will confirm that the pupil has access to their prescribed AAI and will familiarise themselves with the host school's allergy management procedures, Individual Healthcare Plan (where applicable), and emergency response arrangements. The host school should be requested to obtain a second AAI from parents or carers for storage on site in accordance with the school's medication procedures, with the device clearly labelled with the pupil's name.

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up to date and clearly labelled, UHS staff will check medication kept in Bursledon House. For outreach, teachers will check the expiry date and inform parents if it has expired and request an in date substitution before the session can take place.

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

In Bursledon House, UHS staff take responsibility for safe storage of AAIs. On outreach, parents assume this role.

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 sharps bin (provided at UHS).

Spare AAIs (Adrenaline Auto-Injector)

Schools can now legally purchase and store spare Adrenaline Auto-Injectors (AAIs) for children at risk of anaphylaxis. Immediate access to an AAI can be lifesaving. While it is vital that families have their own prescribed AAIs for their child, having spare AAIs at school adds an extra layer of reassurance for everyone involved. It is a step towards creating a safer and more inclusive environment for children managing severe allergies. We have 2 spare AAIs. These can be requested by staff as per individual risk assessments. There will always be a spare pen kept in the school office in an unlocked cupboard. Office staff and the headteacher will be responsible for ensuring it has not expired.

Catering

Southampton Hospital School does not use caterers as all meals are provided by, and supervised, by UHS. If a child is going on a trip outside of the hospital, UHS will provide a lunch for children in line with their own allergy procedures.

However, the school adheres to the following Department of Health guidance recommendations

- Bottles other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.

Allergy awareness and nut bans

Bursledon House is a nut free building.

On the hospital wards and outreach teaching, the school supports the approach advocated by many allergy charities towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

A “whole school awareness of allergies” is a much better approach, as it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils’ allergens, the signs and symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

Risk assessment and IHCPs

The school will conduct a detailed IHCP and/or 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. In addition to this, an Allergy Action Plan will be completed where necessary.

Training

All staff receive allergy awareness training.

Training covers

- Recognition of allergic reactions and anaphylaxis
- When and how to administer an AAI
- Emergency procedures and incident reporting



- Annual whole-school refresher training is mandatory
- New staff, including supply staff, are trained as part of induction

The school maintains a training record showing

- Who is trained?
- The level of training
- Date of last update

Accident and Near-Miss Reporting

All allergy-related incidents and near misses are recorded via the HAMWIC incident form and reported to UHS staff and/or home schools. Near misses are recorded internally (on Bromcom as a 'Medical Event') and used to update policies and practices.

Reports include

- What happened and when?
- Location and causes
- Staff response
- Use of medication
- Outcome and follow—up action.

Incident reports are:

- Shared with parents/carers
- Reported to the LGC
- Used to inform policy and practice review

Allergies and bullying

By law, all schools must have a behaviour policy in place that includes measures to prevent all forms of bullying among pupils, and this is a policy decided by the school. All teachers, pupils and parents must be told what it is, and allergy bullying should be treated seriously, like any other bullying. Schools must, under Section 100 of the Children and Families Act 2014, aim to ensure that all children with medical conditions, 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 health and achieve their academic potential.

12. Monitoring & Review

This policy will be reviewed three yearly by the Head of Estates and a member of the Safeguarding team or sooner if there is a change in legislation and/or guidance.

13. Further information

The Department for Education has provided statutory guidance for schools and colleges on keeping children safe in education.

Other useful websites include:

- NSPCC
- National Bullying Helpline
- Family Lives



- Kidscape
- Anti-Bullying Alliance
- Young Minds
- Childline
- Bully Busters

14. Link to other HET policies

- Southampton Hospital School Behaviour Policy
- HET Educational Visits Policy
- HET Inclusion/SEND Policy
- HET Risk Assessment Procedures
- HET Safeguarding Policy
- HET Supporting Pupils with Medical Conditions Policy