



Allergy Policy

The Tilian Partnership will ensure every pupil with allergies is identified, supported and kept safe while on school premises or during school activities. Our approach is guided by autonomy, integrity and partnership: each school has autonomy to adapt procedures for local context, integrity in following statutory expectations, and partnership with families, clinicians and local health services.

Scope

Applies to all staff, pupils, governors/trustees, supply/agency staff, contractors and volunteers across all Tilian Partnership schools, during school hours, off-site visits, before/after school activities and transport provided by the MAT.

Key responsibilities (who does what)

- CEO: ensure MAT oversight and compliance; ensure schools publish policies on their websites.
- Headteachers: operational responsibility for implementation, local policy adaptation, approving Individual Allergy/Healthcare Plans (IHPs) and ensuring staff training and spare AAI provision; maintain medical/allergy records and IHPs, run termly reviews, coordinate training and liaison with families and clinicians.
- First Aid Lead: maintain AAI stock, check expiry dates, record use and incidents, organise secure storage accessible to staff.
- Class teachers and support staff: know pupils in their care with allergies, follow IHPs, attend required training, know location and use of AAIs.
- Catering/contracted providers: must follow allergen procedures, meal labelling and local risk assessments; caterers must report any ingredient/menu changes promptly.
- Parents/carers: provide full medical information, supply prescribed AAIs and consent forms, keep school notified of changes.

Identification and record-keeping

- At admission and at the start of each academic year (and whenever health changes) parents complete the medical/allergy form indicating known allergies, severity, prescribed medication and emergency contact details.
- The Headteacher maintains a school allergy register and Individual Healthcare Plans (IHPs) for pupils at risk of moderate/severe allergic reactions. IHPs must include: allergen(s); typical reaction; prescribed medication (type, dose, storage); emergency procedures; photos; staff trained to administer; and emergency contacts. IHPs are reviewed termly and after any change or incident.

Individual Healthcare Plans (IHPs) and care planning

- IHPs are written collaboratively with parents/carers and, where appropriate, the pupil's clinician (GP / paediatrician / school nurse). They must be accessible to staff who need them while respecting pupil confidentiality.
- IHPs must include whether the pupil is prescribed an AAI and detail plan for its storage, access and administration. If a pupil carries their own device, the IHP must record this and where a spare is kept.
- For pupils who are not prescribed an AAI but are at risk, record monitoring arrangements and emergency steps.

Emergency medication and spare AAIs

- Each school must hold at least the minimum number of centrally-stored spare AAIs advised in the DfE guidance. Spare AAIs must be stored in unlocked, clearly labelled boxes, checked weekly and replaced prior to expiry. All use of spare AAIs must be recorded and reported to parents and the Designated Medical Lead immediately.
- Prescribed AAIs provided by parents remain primary; spare AAIs act as a backup when a pupil's device is not available or has not been prescribed.

Staff training and competency

- All staff (including lunchtime supervisors, teachers, admin and volunteers) must receive basic allergy and anaphylaxis awareness training annually. Training should cover identifying anaphylaxis, emergency response steps, calling emergency services, use of AAIs, record-keeping and hygiene/safe disposal. Training must be refreshed after any policy change and after a serious incident.
- Staff specifically named in the IHP must receive practical hands-on training in administering AAIs (renewed annually or per provider recommendation). Training records are maintained centrally by the school and made available for MAT compliance checks.

Prevention and everyday routines (universal provision first)

- Universal classroom practice to reduce risk (applies to all pupils): no sharing of food; hand-washing policies; safe seating and awareness where pupils eat; clear signage for allergen-free tables/zones where appropriate.
- For younger pupils and high-risk settings: class teachers and lunchtime staff will supervise eating and monitor for sharing.
- Schools should avoid blanket bans on specific foods unless clinically justified by the IHP; instead, manage risk through communication, routines and supervision. Catering teams must label menus and ingredients and provide allergen information to parents in advance.

Off-site visits and after-school activities

- IHPs must travel with the pupil or be accessible to staff on trips. The trip lead must review the allergy register before the visit, ensure trained staff and AAIs are present and confirm catering arrangements and first-aid cover. Schools must not rely solely on parents to attend trips for their child with a severe allergy.

Reporting, incident management and learning

- Any allergic reaction or administration of an AAI (prescribed or spare) must be recorded on the incident form, parents notified same day and the Headteacher informed. Severe incidents that meet safeguarding thresholds must follow safeguarding and reporting procedures.

- The MAT will collate incident data termly to identify hotspots, training needs and systemic changes (e.g. catering processes, signage).

Storage, hygiene and disposal

- AAls must be stored in unlocked, labelled boxes in a known, accessible location; not locked in cupboards where rapid access is hindered. Temperature/storage checks and weekly expiry checks are mandatory; records kept for audit. Used AAls must be disposed of following local clinical waste guidance and recorded.

Communication and publication

- This policy and the school's allergy policy must be published on each school website and be available on request. All families must be made aware of the policy on enrolment and via termly reminders.

Monitoring, review and governance

- The local governing body will receive an annual report showing: training compliance rates, number of pupils with IHPs, number/use of AAls (spare and prescribed), incident trends and completed actions.
- The MAT will audit each school for compliance before September 2026 The policy will be reviewed no later than annually or whenever the DfE issues revised guidance.