Allergy Safety Policy

September 2026

The Allergy Policy in respect of the Children First Learning Partnership has been discussed and adopted by the Directors Board via Chairs Power to Act after consultation with the Executive Team and H and S Link LAB Members.	
Chair of Board:	*Mrs N. Chell*
Responsible Officer:	*CEO-Mrs A. Rourke*
Agreed and ratified by the Chair of the Board via power to act	*01.9.2026*
To be reviewed:	*October 2027 or earlier if required*

1. Policy Statement

The Children First Learning Partnership (CFLP) is committed to providing a safe, inclusive and supportive environment for all pupils, staff and visitors with allergies in line with Benedict's Law. We recognise that allergies can range from mild to severe and that in some cases exposure to an allergen can result in life-threatening anaphylaxis.

The Children First Learning Partnership acknowledges its duties under the Children and Families Act 2014, the Equality Act 2010, Supporting Pupils with Medical Conditions guidance and the Children's Wellbeing and Schools Act 2026.

We are committed to:

- Promoting the safety, health and wellbeing of all individuals with allergies.
- Minimising the risk of exposure to allergens wherever reasonably practicable.
- Ensuring that staff are trained to recognise and respond to allergic reactions, including anaphylaxis.
- Children with allergies will be enabled to participate fully in school life, including clubs, visits, residential activities, celebrations and enrichment opportunities. Reasonable adjustments will be made wherever necessary to support inclusion.
- Working in partnership with parents, healthcare professionals, catering providers and pupils to ensure effective allergy management.
- Fostering a culture of awareness, inclusion and understanding throughout the school community.

This policy applies to all pupils, staff, volunteers, contractors, visitors and users of the school site.

2. Roles and Responsibilities

2.0 Children First Learning Partnership (Trust)

The Children First Learning Partnership recognises its responsibility to ensure that all academies within the Trust maintain effective arrangements for supporting pupils, staff and visitors with allergies and for complying with relevant legislation, statutory guidance and Trust policies.

The Trust will:

- Establish and maintain an overarching Trust Allergy Management Framework to support consistent practice across all academies.
- Ensure each academy has an up-to-date Allergy Policy that reflects Trust expectations and local arrangements.
- Monitor compliance with allergy-related statutory requirements, including the requirements arising from Benedict's Law and associated Department for Education guidance.
- Require each academy to nominate a senior leader with responsibility for allergy safety and policy implementation.
- Monitor completion of staff training across all academies and ensure appropriate allergy awareness and emergency response training is provided and refreshed.
- Promote a culture of inclusion so that children and young people with allergies can participate fully in all aspects of school life.

- Support academies in developing effective Individual Healthcare Plans, Allergy Action Plans and risk assessments where required.
- Monitor allergy-related incidents, near misses and trends across the Trust to identify emerging risks, share learning and improve practice.
- Ensure appropriate arrangements are in place for the procurement, storage, monitoring and replacement of emergency medication.
- Provide guidance and support to academy leaders following significant allergy incidents, including the review of lessons learned and implementation of corrective actions.
- Facilitate the sharing of good practice and effective allergy management strategies between academies.
- Undertake periodic assurance activities, audits or reviews to evaluate the effectiveness of allergy management arrangements across the Trust.
- Report significant findings, trends and compliance matters to the Trust Board through established safeguarding, health and safety, or risk management reporting arrangements.
- Ensure allergy management forms part of the Trust's wider safeguarding, health and safety and inclusion responsibilities.

Trust Monitoring and Assurance

The Trust will seek assurance that each academy:

- Maintains a current allergy register.
- Holds and reviews appropriate Individual Healthcare Plans and Allergy Action Plans.
- Maintains adequate stocks of emergency medication, including spare adrenaline auto-injectors where required.
- Delivers annual allergy awareness and emergency response training to relevant staff.
- Completes and reviews allergy-related risk assessments.
- Records, investigates and reviews allergy incidents and near misses.
- Publishes and reviews its Allergy Policy annually.
- Implements recommendations arising from incidents, audits and reviews.

Where concerns are identified, the Trust will work collaboratively with academy leaders to put in place proportionate support and improvement actions to ensure pupil safety and regulatory compliance.

The Trust Board receives periodic assurance regarding allergy management arrangements across the Trust and will hold academy leaders to account for the effective implementation of this policy.

2.1 Local Advisory Board

The Local Advisory Board will:

- Ensure that their school has an Allergy Safety Policy which is reviewed annually.
- Monitor implementation of the policy through the school's health and safety monitoring arrangements.
- Ensure adequate resources are available for allergy management and staff training.

2.2 Headteacher

The Headteacher is the school's named senior leader responsible for allergy safety and will:

- Oversee implementation of this policy.
- Ensure appropriate allergy awareness and emergency response training is provided.
- Maintain oversight of allergy records and Individual Healthcare Plans (IHPs).
- Ensure appropriate risk assessments are completed.
- Review allergy-related incidents and near misses.
- Ensure information is shared appropriately with relevant staff.
- Monitor the availability and suitability of emergency medication.

2.3 Staff

All staff are responsible for:

- Familiarising themselves with this policy.
- Attending annual allergy awareness training.
- Knowing how to identify pupils with allergies.
- Understanding individual healthcare plans and allergy action plans where applicable.
- Taking reasonable steps to minimise allergen exposure.
- Responding promptly to emergencies.
- Reporting allergy incidents and near misses.

Named Senior Leader for Allergy Safety	Carolyn Hodson
Named Governor for Allergy Safety	Beth Blanchard

2.4 Parents and Carers

Parents and carers are responsible for:

- Informing the school of any allergy diagnosis.
- Providing up-to-date medical documentation and action plans.
- Providing prescribed medication where required.
- Replacing medication before expiry dates.
- Updating the school promptly if circumstances change.

3. Creating a Culture of Allergy Awareness

The Children First Learning Partnership recognises that allergies can have a significant impact on a child's physical and emotional wellbeing.

We will:

- Promote a supportive and inclusive environment.
- Encourage understanding and respect for individuals with allergies.

- The school will promote allergy awareness through assemblies, PSHE, health education and age-appropriate curriculum activities to develop pupil understanding of allergies, anaphylaxis, inclusion and the importance of avoiding food sharing.
- Ensure children with allergies are able to participate in all aspects of school life.
- Address any concerns relating to exclusion, anxiety or emotional wellbeing.

  Schools within the Children First Learning Partnership will not tolerate bullying related to medical conditions or allergies. Any deliberate act that places a child at risk through exposure to an allergen will be treated seriously and managed in accordance with the Behaviour Policy.

4. Allergy Awareness Training

All staff present during times when pupils are on site will receive annual allergy awareness and emergency response training.

This includes:

- Teaching staff.
- Support staff.
- Lunchtime supervisors.
- Catering staff.
- Breakfast and after-school club staff.
- Regular volunteers.
- Supply and agency staff.
- Peripatetic staff.

New staff, supply staff and volunteers will receive allergy awareness information as part of induction procedures.

Training will include:

- Understanding allergies and associated conditions.
- Food allergy, asthma, eczema, hay fever and other allergic conditions.
- Differences between food allergy, coeliac disease and food intolerance.
- Recognition of allergic reactions and anaphylaxis.
- Emergency procedures.
- Locating emergency medication.
- Administration of adrenaline auto-injectors (AAIs).
- Staff will know how to access pupil allergy records, Allergy Action Plans, Individual Healthcare Plans and allergen information provided by catering services.
- Use of emergency asthma inhalers.
- Recording and reporting procedures.
- Understanding Individual Healthcare Plans and Allergy Action Plans.
- Understanding the impact allergies can have on wellbeing.
- Where possible, staff will receive practical opportunities to handle and practise using trainer adrenaline auto-injectors to maintain competence and confidence.

Training records will be stored on Arbor and reviewed on an annual basis by the Headteacher and Health and Safety Link Governor.

The school will undertake an annual anaphylaxis emergency response exercise to test procedures, staff confidence and access to emergency medication. Any learning identified will be used to improve procedures and training.

5. Identification of Individuals with Allergies

Information regarding allergies is gathered through:

- Arbor
- Admission documentation.
- Annual medical updates.
- Communication from parents and carers.
- Healthcare professionals.
- Previous educational settings.

The school maintains an up-to-date register of:

- Pupils with allergies.
- Known allergens.
- Prescribed medication.
- Allergy Action Plans.
- Asthma Action Plans where applicable.
- Individual Healthcare Plans.
- Where appropriate, allergy information and healthcare plans will be shared as part of transition arrangements with receiving schools or settings, in accordance with data protection requirements and parental agreement.

Staff requiring knowledge of a child's allergy will be informed appropriately and confidentially.

Visitors and staff with allergies are encouraged to inform the school so that appropriate precautions can be implemented where reasonably practicable. Visitors attending events involving food will be encouraged to notify the school of any significant allergies in advance. Staff allergies requiring workplace adjustments will be recorded and managed in line with individual risk assessments. Contractors, external providers and organisations operating on the school site will be informed of relevant allergy management requirements where necessary to safeguard individuals with allergies.

6. Individual Healthcare Plans (IHPs-please refer to Appendix A, Section 16)

An Individual Healthcare Plan will be developed where a pupil:

- Has an allergy that impacts their participation in school activities.
- Is at risk of harm due to their allergy.
- Requires support arrangements that differ from those generally available.

The IHP will:

- Identify known allergens.
- Specify risk reduction measures.
- Detail emergency arrangements.
- Record medication requirements.
- Include or reference any Allergy Action Plan or Asthma Action Plan.
- Identify responsibilities of staff.

Plans will be reviewed:

- Annually.
- Following any significant allergic reaction.
- When medical advice changes.
- When updated action plans are received.

7. Minimising Risk

The Children First Learning Partnership recognises that it is not possible to guarantee an allergen-free environment. However, reasonable measures will be implemented to minimise risk. We ensure that the information we hold is shared with the lunchtime team. Allergy management and anaphylaxis is included in school risk assessments to identify risks and plan control measures to minimise the risk of exposure.

Food Provided by School

The school and catering provider will:

- Comply with food allergen legislation.
- Maintain awareness of pupils with food allergies.
- Provide allergen information where required.
- Liaise with parents regarding dietary requirements.
- Implement reasonable precautions to reduce allergen exposure-this may include coloured trays or plates, information cards that sit on the coloured tray, photos in the kitchen. Two people should check the correct meal goes to the correct child.
- Ensure that food is always labelled

Food Brought into School

Parents and staff should:

- Avoid sending items that are known to present a significant risk to pupils with identified allergies where requested by the school.
- Follow any specific guidance communicated relating to individual pupils.
- Teach children not to food share, trade food or share utensils or food containers and the reasons why.

The school will not operate a "guaranteed nut-free" environment but will take reasonable steps to minimise risk where pupils have severe allergies.

Curriculum Activities

Staff planning activities must consider allergy risks when:

- Cooking.
- Food tasting.
- Science investigations.
- Art and craft activities.
- Gardening.
- Animal handling.
- Forest School sessions.
- Special events.

PTA Events

PTA events, as best practice, follow FSA (Food Standards Agency) legislation for food labelling, creating allergen matrices, as necessary. Ensuring that PTA members who are serving food have a basic awareness of allergen management through free FSA training.

Appropriate risk assessments must be completed and labels must be read carefully for food allergens and how to prevent cross-contamination during the handling, preparation and serving of food.

Airborne and Contact Allergens

Where pupils have allergies to environmental, contact or airborne allergens, reasonable adjustments will be implemented based on medical advice and individual risk assessments.

8. Prescribed Adrenaline Devices

Children prescribed adrenaline auto-injectors should have access to both prescribed devices at all times, this includes during fire drills, lockdowns and other emergency situations. Where appropriate, children will be encouraged to carry their devices with them. Where this is not appropriate due to age or individual circumstances, devices will be stored in an unlocked and readily accessible location. Copies of Allergy Action Plans will be kept with medication wherever practicable.

The school will ensure:

- Adrenaline devices accompany pupils during outdoor learning, PE, sporting events and educational visits.
- Medication locations are known to relevant staff.
- Expiry dates are monitored regularly.
- Parents are informed when replacement medication is required.

Records will be maintained of:

- Prescribed AAIs.
- Medication expiry dates.
- Associated Allergy Action Plans.

9. Spare Adrenaline Auto-Injectors

The Children First Learning Partnership expects each school to maintain two pairs of emergency adrenaline auto-injectors appropriate for the age range of pupils on roll. They are located in the main office in the case on the wall. Spare devices may be used when:

- A pupil's prescribed device is unavailable.
- A prescribed device misfires.
- An individual experiences anaphylaxis for the first time.

AAI for children under age 6 years	***AAI for individuals over 6 years of age***
(150 micrograms)	*(300 micrograms)*
e.g. EpiPen Junior, Jext 150	*e.g. EpiPen, Jext 300*

All spare devices are checked termly by the Headteacher and First Aid Lead. Devices are replaced immediately following use or expiry and disposed of safely through an approved pharmacy or sharps disposal process.

The school will ensure:

- Spare devices are clearly labelled.
- Devices are stored in pairs.
- They are readily accessible and never locked away.
- Staff know their location.
- Devices can be accessed within five minutes anywhere on site.

The Headteacher will ensure:

- Regular expiry date checks.
- Replacement of used or expired devices.
- Safe disposal of expired devices.

10. Educational Visits and Off-Site Activities

The Children First Learning Partnership is committed to ensuring that children with allergies can safely participate in educational visits and off-site activities.

Visit leaders in our schools will:

- Review Individual Healthcare Plans.
- Complete appropriate risk assessments.
- Ensure medication accompanies pupils.
- Ensure suitably trained staff are present.
- Confirm emergency procedures and communication arrangements.

No pupil will be excluded from a visit solely because of an allergy unless a safe arrangement cannot reasonably be achieved.

11. Emergency Procedures

All allergic reactions will be treated seriously.

In the event of a suspected allergic reaction, staff will:

1. Follow the pupil's Allergy Action Plan.
2. Administer medication where required.
3. Call 999 immediately if anaphylaxis is suspected.
4. Administer adrenaline without delay where indicated.
5. Contact parents or carers as soon as practicable.
6. Ensure the pupil is monitored continuously until medical assistance arrives.

A second adrenaline device should be administered if symptoms persist and medical advice indicates this is necessary.

12. Recording Incidents and Near Misses

All allergy incidents and near misses will be recorded and investigated.

Records will include:

- Date and time.
- Details of allergen exposure.
- Symptoms observed.
- Action taken.
- Outcomes.
- Follow-up recommendations.

Allergy-related incidents and near misses will be reviewed using a "lessons learned" approach. Findings will be shared, where appropriate, with staff and the Local Advisory Board and will inform future policy reviews, risk assessments and healthcare plans.

Significant incidents will be reported in accordance with Children First Learning Partnership health and safety procedures. Where an allergic reaction is linked to food provided by the school or catering provider, consideration will be given to reporting the incident to the local authority Environmental Health Team where appropriate.

13. Unacceptable Practice

The following practices are considered unacceptable and will not be permitted:

- preventing children from accessing medication
- unnecessarily excluding pupils from activities
- requiring parents to attend school to administer routine medication
- ignoring healthcare advice
- discriminating against pupils because of allergies
- requiring parents to attend visits solely because of allergies.
- ignoring the views of pupils and parents
- assuming all allergies require the same support
- sending an unwell child unaccompanied to the office
- penalising attendance related to medical appointments

The Children First Learning Partnership recognises that concerns relating to a child's allergy management may, in some circumstances, constitute a safeguarding concern. Examples may include repeated failure to provide prescribed medication, failure to share relevant medical information, or actions that place a child at avoidable risk. Such concerns will be managed in accordance with the school's safeguarding procedures.

14. Information Sharing and Confidentiality

The Children First Learning Partnership recognises that allergy information is special category personal data under UK GDPR.

Information will be:

- Shared only where necessary to safeguard individuals.
- Accessible to staff requiring the information.
- Stored securely.
- Managed in accordance with the school's Data Protection Policy.

Arrangements may include:

- Staff briefing documents.
- Medical alerts.
- Healthcare plans.
- Emergency information held in classrooms and relevant areas.

Information sharing will always seek to balance privacy and safety.

15. Monitoring and Review

Allergy-related risks form part of the school's wider health and safety risk management arrangements and are reviewed through the school's risk assessment and monitoring procedures. Significant allergy risks and

control measures form part of the school's risk register and are reviewed annually as part of the health and safety governance meeting.

This policy will be reviewed:

- Annually.
- Following any significant allergy incident.
- Following any serious near miss.
- When legislation or guidance changes.

Reviews will consider:

- Incident records.
- Near misses.
- Staff feedback.
- Parent feedback.
- Updates to statutory guidance.

This policy will be published CFLP school websites and provided in hard copy on request.

Linked policies and documents:

- Supporting Pupils with Medical Conditions Policy
- Medicines Policy
- First Aid Policy
- Educational Visits Policy
- Safeguarding Policy
- Food Safety / Catering Arrangements
- Lettings and External Provider Arrangements

16. Appendix-Individual Healthcare Plan

<table>
<tr><th colspan="2">NAME – Individual Healthcare Plan for allergy</th></tr>
<tr><td>Date of birth:</td><td rowspan="4">Current photo</td></tr>
<tr><td>Year / class:</td></tr>
<tr><td>Emergency contacts:</td></tr>
<tr><td>Staff who need to be aware:</td></tr>
<tr><td colspan="2">Allergy:
Note what allergy the child or young person has.
Note any known allergens.
Note whether the child or young person is likely to be aware that they are having an allergic reaction and whether they can alert others.</td></tr>
<tr><td colspan="2">How the allergy is managed:
Note any care or action plans or prescribed medication issued by healthcare professionals.
If the allergy can be partly or wholly managed by practical adjustments (for example avoidance of known allergens), note them here.
Note the extent to which the child or young person is able to take responsibility for managing their allergy.</td></tr>
<tr><td colspan="2">Impact on education:
Indicate the potential harm which might come to the child or young person if their allergy is not managed properly.
Indicate how the allergy may impact on the child or young person’s learning.
Indicate how the allergy may impact on the child or young person’s emotional wellbeing.
If relevant, note any interaction between allergy and SEN.</td></tr>
<tr><td colspan="2">Arrangements for support:
Give details of the specific support or adaptations which the school, college or early years setting will put in place, within its educational remit.
Outline measures to reduce the risk of contact with known allergens.
Give details of the specific support or adaptations to manage food allergy at meal and snack times.
Note arrangements for maintaining educational progress where absence or missed learning occurs due to allergy.</td></tr>
<tr><td colspan="2">Visits and trips:
Give details of any arrangements or procedures which may be required for school trips or other activities outside of the normal timetable that will ensure the child can participate.
Note any requirement for a risk assessment and prompts for specific issues which should be considered.</td></tr>
<tr><td colspan="2">Emergency response:
Where an Action Plan issued by a healthcare professional covers emergency response, refer to it and ensure it is attached.
Otherwise summarise the signs or symptoms which would indicate an emergency.</td></tr>
</table>

Set out what to do in an emergency, including whom to contact. *If relevant, note where "spare" adrenaline devices are located.*	
Last discussed with parents:	**Date**
Issued by:	**Date**:
Next planned review:	**Date**:

NAME – Individual Healthcare Plan for allergy **Annex: Medication needed while in school / college / setting**	
Non-prescription medication: *Record any <u>non</u>-prescription medication (e.g. oral antihistamines) which the child or young person may require to manage their allergy in the education setting* • *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Parental consent:	**Date**:
Prescription medication: *Record any prescription medication for allergy prescribed by a healthcare professional (e.g. adrenaline).* *Note whether it is emergency medication; where the medication is stored; and how and when the child or young person may need access.* *Note whether parental consent has been given for the allergy medication to be administered, and the date of consent.*	
Prescribed by:	**Date**:
Parental consent:	**Date**:
Use of "spare" adrenaline devices: *Note whether parental consent has been given to administer adrenaline (e.g. using "spare" adrenaline devices) in an emergency.*	
Parental consent:	**Date**:
Use of "spare" salbutamol inhaler: *If relevant (i.e. the child or young person is prescribed an asthma reliever inhaler), note whether consent has been given to use a "spare" salbutamol reliever inhaler.*	
Parental consent:	**Date**: