Cheshire Academies Trust

Inspiring hearts and minds

CAT Allergy Safety Policy

Introduction

Cheshire Academies Trust is committed to providing a safe, inclusive and supportive environment for all pupils across its schools, including those with allergies and other medical conditions. All of our schools aim to manage allergy risk effectively at every stage of the school day, and to respond promptly and appropriately in the event of an allergic reaction.

This policy provides the framework within which each school within the Trust manages the risks associated with allergies and anaphylaxis. It is designed to support each school's readiness for the new allergy-safety requirements being introduced through the Children's Wellbeing and Schools Act 2026 and the DfE statutory guidance *Supporting children and young people with medical conditions and allergy*, expected to apply to schools in England from September 2026. It builds on the existing duty under section 100 of the Children and Families Act 2014 to support pupils with medical conditions, and reflects the strengthened Early Years Foundation Stage (EYFS) requirements relating to safer eating and supervision that took effect from 1 September 2025. ("Benedict's Law" is the name of the campaign, following the death of Benedict Blythe, that prompted these changes; it is not itself a statute.)

We adopt a whole-school approach, working in positive partnership with the whole school community so that pupils with allergies can participate fully and safely in the life of the school.

This document is the school's allergy safety policy for the purposes of the Department for Education's statutory guidance *Supporting children and young people with medical conditions and allergy*. It is a separate, dedicated allergy safety policy and should be read alongside the school's Supporting Pupils with Medical Conditions Policy, which covers the full range of medical conditions. The school maintains an allergy safety policy even where no pupil currently has a known history of anaphylaxis.

1. Introduction and Legal Framework

This policy sets out each school's commitment to providing a safe and inclusive environment for pupils with allergies. The operative statutory duty is section 100 of the Children and Families Act 2014, which requires schools to make arrangements to support pupils with medical conditions, including allergies. Strengthened allergy-safety obligations are being introduced through the Children's Wellbeing and Schools Act 2026 and the DfE statutory guidance, expected to apply from September 2026. ("Benedict's Law" is the campaign name for these changes, not a statute.)

1.1 Statutory compliance

This policy has regard to, and should be read alongside, the following legislation and guidance:

- **Children's Wellbeing and Schools Act 2026 and forthcoming DfE statutory guidance:** introduce the strengthened allergy-safety requirements (spare AAIs, a published whole-school allergy policy, staff training and incident recording), expected

to apply from September 2026. ("Benedict's Law" is the name of the campaign that led to these changes, following the death of Benedict Blythe; it is not itself a statute.)

- **Children and Families Act 2014 (Section 100):** the duty to support pupils with medical conditions – the existing, operative statutory duty on which this policy builds.
- The Schools Allergy Code.
- **Supporting children and young people with medical conditions and allergy (DfE, forthcoming):** the updated statutory guidance, which replaces the former "Supporting pupils at school with medical conditions" and applies to schools in England. It was still in draft when this policy was prepared and should be checked against the final published version.
- **EYFS Statutory Framework (updated 1 September 2025):** strengthened requirements to ensure safer eating, including a paediatric-first-aid-trained member of staff being present whenever children are eating, gathering information about children's allergies and dietary needs before they start, and staff sitting facing children while they eat.
- **Human Medicines Regulations 2017:** governing the use of emergency spare AAIs.
- **Food Information Regulations 2014:** statutory allergen labelling requirements.

1.2 Whole-school approach

We adopt a whole-school approach to allergy management, ensuring that all members of the school community – pupils, parents/carers, staff (teaching, support, catering and administrative) and visitors – understand their roles and responsibilities in reducing allergy risks and responding effectively to allergic reactions.

1.3 Aims

- To minimise the risk of exposure to allergens for pupils with diagnosed allergies.
- To ensure that all staff are confident in recognising and responding to allergic reactions, including anaphylaxis.
- To promote an inclusive environment where pupils with allergies can participate fully in all school activities without feeling stigmatised.
- To establish clear procedures for communication, record-keeping and emergency response.

2. Roles and Responsibilities

2.1 Trust Board

- Has overall responsibility for ensuring the school meets its legal obligations regarding pupils with medical conditions, including allergies.
- Approves and regularly reviews this policy.
- Ensures adequate resources and training are provided for allergy management.
- Ensures that a named member of the Local Governing Body (the link governor for medical conditions and allergy) and a named senior leader hold responsibility for this policy.

2.2 Headteacher

- Is responsible for the day-to-day implementation of this policy.
- Ensures all staff are aware of and adhere to the policy.
- Delegates responsibilities as appropriate, including appointing a Designated Allergy Lead.
- Ensures effective communication with parents/carers, staff and external agencies.

2.3 Designated Allergy Lead (DAL)

Each school will appoint a Designated Allergy Lead (for example, the School Business Manager and/or Deputy Headteacher). The DAL:

- Oversees allergy management across the school.
- Acts as the primary point of contact for staff, pupils and parents/carers regarding allergies.
- Ensures allergy information is accurately recorded, kept up to date and communicated to relevant staff.
- Coordinates and monitors allergy-related training for all staff.
- Manages the stock of school-held AAIs, including checking expiry dates (in liaison with the school's nursing team or health provision where this is in place).
- Reviews records of allergic reactions and near-misses, implementing any learning.

2.4 All staff (teaching, support, catering, administrative)

- Must be aware of the school's allergy policy and their role in its implementation.
- Know which pupils in their care have allergies and the location of their medication and Individual Healthcare Plans (IHPs).
- Are able to recognise the signs and symptoms of allergic reactions and anaphylaxis.
- Know how to access and administer AAIs without delay where trained and required.
- Participate in allergy and anaphylaxis training and refresher drills.
- Report any concerns regarding allergy management or potential risks.
- Supervise children closely, especially during mealtimes (EYFS: sitting facing children to monitor for choking and allergic reactions).
- Reinforce good hand hygiene to prevent cross-contamination.

2.5 Parents / carers

- Provide the school with detailed and up-to-date information about their child's allergies, including triggers, symptoms, previous reactions and prescribed medication (e.g. AAIs, antihistamines).
- Provide two in-date, clearly labelled AAIs and any other necessary medication with clear instructions.
- Inform the school immediately of any changes to their child's medical condition or medication.
- Work in partnership with the school to develop and review their child's IHP and Allergy Action Plan.

- Ensure their child understands their allergy to the best of their ability and encourage self-management appropriate to their age and development.
- Inform the school if their child will be attending an out-of-school activity or trip, ensuring medication and information are provided.

2.6 Pupils (age-appropriate)

- Understand their allergy and the importance of avoiding triggers.
- Know where their medication is kept (if old enough to carry it).
- Know who to tell if they feel unwell or believe they have had a reaction.
- Understand the importance of not sharing food.

3. Identification and Information Sharing

3.1 Admissions process

The admissions team will gather initial information about any allergies or special dietary requirements during enrolment.

3.2 Initial assessment and information gathering (EYFS focus)

Before a child starts in the setting, parents/carers **must** be asked about their child's special dietary requirements, preferences, food allergies and intolerances. This information **must** be shared with all relevant staff.

3.3 Allergy register

Each school will maintain a comprehensive and easily accessible allergy register for all pupils with diagnosed allergies, including:

- The pupil's name and photograph (with parental consent).
- Specific allergens.
- Symptoms of reaction.
- Location of medication.
- Key emergency contacts.
- Details of the pupil's Individual Healthcare Plan (IHP).

3.4 Communication

Relevant allergy information will be shared with all staff who have direct responsibility for the pupil, including supply staff and those supervising out-of-class activities (e.g. PE, clubs and trips). This may include displaying photographs and allergy information in designated staff-only areas (e.g. the staff room and kitchen).

3.5 Confidentiality

Allergy information will be handled with appropriate confidentiality and shared only with those who need to know in order to ensure the pupil's safety.

3.6 Staff and visitors with allergy

The school will also take reasonable steps to identify members of staff, volunteers and regular visitors who have a known allergy at risk of anaphylaxis, so that appropriate emergency arrangements can be made. Staff are encouraged to disclose any relevant allergy, in confidence, to the Designated Allergy Lead.

4. Individual Healthcare Plans (IHPs) and Action Plans

4.1 Requirement

All pupils with a diagnosed allergy at risk of anaphylaxis (or where specified by a healthcare professional) will have an Individual Healthcare Plan (IHP). For EYFS settings, IHPs **must** be in place for children with known allergies and intolerances and kept updated.

4.2 Development

IHPs will be developed in partnership between the school (the Designated Allergy Lead and relevant staff), parents/carers and, where appropriate, the pupil and their healthcare professional (e.g. school nurse, GP or allergy specialist). Where a school has dedicated onsite health provision (such as an NHS nursing team), IHPs may, in the majority, be managed by that team.

4.3 Content

The IHP will detail:

- The specific allergy / allergens.
- Recognised symptoms of a reaction (mild, moderate, severe).
- Steps to minimise exposure.
- Specific instructions for administering medication (e.g. AAI dosage, location and when to administer).
- Emergency contacts and procedures (who to call and when to call 999).
- Any other relevant information (e.g. asthma management, which can affect allergy severity).
- An Asthma Plan, where the pupil also has asthma, captured within or alongside the IHP (asthma can increase the risk and severity of an allergic reaction).

4.4 Allergy Action Plans

Where a pupil has an AAI prescribed, a clear, written Allergy Action Plan (e.g. the BSACI plan, where provided by parents/carers from their allergy practitioner or doctor) will be attached to or incorporated into the IHP. This will include a photograph of the pupil and clear instructions for emergency management. Where a school has onsite health provision, Allergy Action Plans may, in the majority, be managed by that team.

4.5 Review

IHPs and Allergy Action Plans will be reviewed at least annually, or sooner if there are any changes to the pupil's condition, medication or school circumstances (e.g. starting a new key stage or a new diagnosis).

5. Medication Management

5.1 Provision

Parents/carers are responsible for providing the school with two in-date, clearly labelled AAIs and any other prescribed allergy medication (e.g. antihistamines).

5.2 Storage

- All medication will be stored in an easily accessible, unlocked and clearly designated location known to relevant staff, in accordance with the school's Medication Management Policy. A KITT (or equivalent emergency kit) will be available in an easily accessible, unlocked and clearly designated location known to all staff.
- Medication will be kept out of sight and reach of children (especially in EYFS settings).
- For older pupils capable of self-carrying, their AAI may be kept with them, with appropriate oversight and agreement set out in their IHP.
- Medication must be taken on all off-site activities and trips.

5.3 Expiry dates

The Designated Allergy Lead (in liaison with the school's nursing team or health provision where in place) will maintain a register of all AAIs, including brand, dose and expiry dates, and will notify parents/carers well in advance when replacement medication is needed. A system for expiry alerts will be in place and implemented.

5.4 School-held spare AAIs

Each school will hold a supply of "spare" AAIs for emergency use, stored in accessible and clearly designated locations (for example, with the nursing team or health provision where in place, and in an easily accessible central area).

- These can be administered without a prescription to a pupil known to be at risk of anaphylaxis whose own prescribed AAI is not immediately available, or to an individual experiencing anaphylaxis who has not previously been diagnosed, where deemed appropriate by the emergency services (999).
- Written parental consent for the use of a school-held spare AAI will be obtained for pupils with diagnosed allergies.
- The spare AAIs will be stored securely but accessibly and routinely checked for expiry.

6. Risk Reduction Strategies

6.1 Catering and food management

- All school food providers (in-house or external caterers) will comply with the Food Information Regulations 2014, providing clear allergen information for all food served.
- Detailed allergen matrices will be available and regularly updated.
- Catering staff will receive specific training on allergen awareness, cross-contamination prevention and emergency procedures.
- Individual dietary requirements for pupils with allergies will be communicated to catering staff well in advance.

- Specific measures to prevent cross-contamination will be in place (e.g. dedicated preparation areas, colour-coded equipment and separate serving procedures).
- **EYFS specific:** the school will consider using different coloured plates or serving methods for children with allergies.

6.2 Classroom and curriculum activities

- Staff will consider food allergies when planning activities involving food (e.g. cooking lessons, science experiments, art projects and rewards). Non-food alternatives will be offered.
- Parents/carers will be informed in advance of any planned food-related activities to discuss safe participation.
- The sharing of food in school is strongly discouraged.
- Birthdays and celebrations will be managed sensitively, with a preference for non-food treats or school-provided safe alternatives, agreed with parents/carers.

6.3 School trips and out-of-school activities

- The Trust's approved educational visits assessment system (e.g. Evolve), or an equivalent assessment by a competent person with knowledge of school protocols and requirements, will explicitly address allergy management for all trips, out-of-school activities and after-school clubs, including medication, trained staff and emergency procedures.
- All relevant allergy information and medication will accompany the pupil on trips.
- Staff leading trips will be fully briefed on pupils' allergies and emergency protocols.

6.4 Third-party providers on site

All third-party providers (including wraparound care, holiday clubs and external curriculum coaches) must formally agree to adhere to the school's Allergy Safety Policy as a condition of their site-use agreement.

- The school will ensure that providers have access to the Individual Healthcare Plans (IHPs) for all pupils in their care.
- Providers must handle this medical data in accordance with UK GDPR, while ensuring it is immediately accessible to all frontline club staff during the session.
- Providers must submit a specific risk assessment for any activity involving food (e.g. a food technology club or decorating biscuits) for approval by the school's Senior Leadership Team (SLT).

6.5 Environment

- Regular cleaning routines will be in place to minimise allergen residues on surfaces.
- Pupils will be encouraged to wash their hands before and after eating.
- While the school cannot guarantee an allergen-free environment, it aims to minimise risk through robust management.

6.6 Weaning (EYFS specific)

- Staff must recognise that allergies can occur at any time, especially when weaning.
- Settings must support weaning in stage-appropriate ways, working closely with parents/carers to ensure food is prepared suitably to prevent choking and using textures eaten at home. The school ensures new allergens are introduced by parents/carers first.
- Staff must sit facing children when they are eating to monitor for choking and allergic reactions.

7. Training and Paediatric First Aid

7.1 Whole-staff training

All school staff will receive basic awareness training, including:

- Understanding common allergens and allergic reactions.
- Recognising the signs and symptoms of anaphylaxis.
- Knowledge of the school's allergy policy and emergency procedures.
- Understanding the importance of administering AAIs without delay.

7.2 Anaphylaxis training

Every member of staff will receive basic allergy awareness training. In addition, all staff working directly with pupils at risk of anaphylaxis – including key workers, teaching assistants, lunchtime supervisors and first aiders – will receive specialist, accredited training. This training will be face-to-face where possible to ensure practical competency in administering all types of AAI device held on site.

7.3 Refresher training

Training will be refreshed annually, or more frequently as needed (e.g. when new staff join or new pupils with allergies enrol). Anaphylaxis emergency drills will be conducted periodically.

7.4 Paediatric First Aid (PFA) and mealtimes

In accordance with the EYFS framework, a staff member holding a valid Paediatric First Aid qualification will be present during all mealtimes. This staff member is trained to recognise the symptoms of allergic reactions and anaphylaxis.

7.5 Emergency response drills

In line with the Schools Allergy Code and statutory guidance, the school will conduct regular anaphylaxis emergency drills to ensure all staff can fulfil their duty to respond to a medical emergency. These exercises test the school's internal communication systems, the speed of retrieving both the pupil's prescribed AAI and the school's spare emergency kit, and the accuracy of the emergency 999 protocol.

8. Emergency Procedures

8.1 Recognition

All staff will be trained to recognise the signs and symptoms of an allergic reaction (mild, moderate and severe / anaphylaxis).

8.2 Immediate action

IF IN DOUBT, GIVE ADRENALINE.

- Follow school procedures for a medical emergency by activating the alarm to receive medical and senior leadership support.
- If a pupil is suspected of having anaphylaxis, administer their prescribed AAI (or the school spare) without delay, following the instructions on their Allergy Action Plan and the device.
- Immediately call 999 for an ambulance, stating "**anaphylaxis**".
- Position the child appropriately (lying flat with legs raised, or sitting up if breathing is difficult).
- Do **not** stand the child up or allow them to walk if they are having an anaphylactic reaction.
- Stay with the child until medical help arrives.
- If symptoms do not improve within five minutes of the first dose, administer a second dose using another AAI.
- Even if symptoms improve, all pupils who receive an AAI must be taken to hospital for further observation.

8.3 Record keeping

All allergic reactions, including near-misses, will be recorded in detail (e.g. via CPOMS) and reviewed by the Designated Allergy Lead to identify any patterns or areas for improvement. Parents/carers will be informed of any reaction.

Serious incidents and near-misses will also be reported to the pupil's parents/carers and to the Local Governing Body, alongside any statutory reporting that applies (for example, reporting to the Health and Safety Executive under RIDDOR where required, and reporting any allergen-related food safety incident to the relevant authority). Lessons learned from any serious incident or near-miss will prompt a review of this policy and the related arrangements.

9. Partnership with Parents and External Agencies

9.1 Open communication

We are committed to open and ongoing communication with parents/carers regarding their child's allergy management.

9.2 Healthcare professionals

We will work collaboratively with healthcare professionals (GPs, school nurses and allergy specialists) to ensure IHPs are accurate and appropriate.

9.3 Information sharing

With parental consent, relevant medical information will be shared with other professionals involved in the child's care.

10. Wellbeing of Pupils with Allergy

The school is committed to promoting the wellbeing of pupils with allergies and to ensuring they are fully included in the life of the school. Staff will be alert to the emotional impact of living with an allergy and of experiencing or witnessing an allergic reaction, both for the pupil concerned and for those around them. The school will take active steps to prevent allergy-related bullying or stigma, will involve pupils in decisions about their own care in an age-appropriate way, and will manage arrangements such as seating, food-based activities and celebrations sensitively so that no pupil feels singled out or excluded.

11. Monitoring and Review

This policy will be reviewed at least annually by the Trust Board and the Designated Allergy Lead. The effectiveness of the policy and procedures will be monitored through:

- Regular staff training evaluations.
- Review of incident reports and near-miss events.
- Feedback from parents/carers, pupils and staff.
- Compliance with updated guidance from the Department for Education and other relevant bodies.

This policy will be made publicly available on the school's website and communicated to all staff, parents/carers and pupils.