Agreed: September 2026
Next Review: September 2027

Allergy Safety Policy (Benedict's Law)



Chandler's Ford Infant School

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Purpose

This policy sets out the school's commitment to providing a safe, inclusive and supportive environment for all pupils with food allergies and other severe allergies. It outlines the responsibilities of staff, governors, parents/carers and pupils to minimise the risk of allergic reactions while enabling all children to participate fully in school life.

This policy reflects the principles of **Benedict's Law**, ensuring that schools have clear procedures to prevent, recognise and respond to allergic reactions, including anaphylaxis. It should be read alongside the school's First Aid Policy, Educational Visits Policy, Safeguarding Policy and Health and Safety Policy.

Section 34 of the Children's Wellbeing and Schools Act 2026 requires that LA-maintained schools, academies and PRUs must have an allergy safety policy, in line with the Allergy Safety in Schools guidance in July 2026.

At Chandlers Ford Infant School the Headteacher and SENCO have responsibility for allergy safety, including driving the implementation of the allergy safety policy and contributing to or leading review of the policy.

This allergy safety policy should be reviewed at least annually. Policies can be reviewed more frequently, particularly where incidents or "near misses" suggest areas for improvement. Any review should take account of any incidents and "near misses" and should seek to learn lessons from them. This is essential where incidents suggest that policies or procedures may leave individuals with allergy at risk.

Governing bodies should ensure that allergy safety policies are readily accessible to parents and staff. Policies should be published on the school, college or setting's website and be made available in hard copy on request. At Chandler's Ford Infants our allergy governor is: Aneli Starks

Culture

Chandlers Ford Infant School is committed to developing a positive culture where allergy safety is everyone's responsibility.

We will:

- Promote an inclusive environment where pupils with allergies are fully included in all aspects of school life.
- Foster understanding and empathy towards pupils with allergies.
- Ensure allergy safety is embedded into everyday practice rather than treated as an isolated issue.
- Encourage open communication between staff, parents/carers, healthcare professionals and pupils.

Maintain a non-stigmatising approach that avoids singling out children because of their allergies.

Awareness training

Staff will be **trained** annually in allergy awareness and emergency response.

All staff present during times when pupils are scheduled to be on site receives allergy awareness training annually. This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It includes catering staff and others who may oversee children and young people at breakfast or after school clubs. It is not intended to include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

New staff will have allergy training included as part of their induction training package. Supply and cover staff will receive the school's allergy awareness training guide as part of their supply teacher pack.

Allergy awareness training ensures 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;
- Know how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
- Receive training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);
- Understand the **impact** allergy can have on a child or young person's wellbeing;
- Understand the school, college or setting'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").

Training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

Wellbeing

The **wellbeing** of children and young people with allergy will be promoted, since the risk posed by allergy (and the possibility of anaphylaxis) can be a significant cause of anxiety.

The school will:

- Support pupils to feel confident and included.
- Reduce anxiety through effective planning and staff preparedness.
- Address bullying, teasing or inappropriate behaviour relating to allergies immediately, in line with the school's behaviour and anti-bullying policy.
- Encourage age-appropriate understanding of allergy management and self-care where appropriate.
- Work closely with families where a child's anxiety or wellbeing is affected by their allergy.

Minimising risk

The school will minimise the risk of individuals (whether children, young people, staff or visitors) coming into contact with their known allergens.

These include:

- Maintaining an up-to-date allergy register.
- Identifying allergen risks within classrooms, dining areas and school activities.
- Carrying out risk assessments where allergens may be present.
- Encouraging effective hand washing before and after eating.
- Cleaning tables and eating areas appropriately.
- Supervising children during snack and meal times.
- Ensuring food sharing between pupils is discouraged.
- Carefully considering the use of allergens within curriculum activities.
- Working with catering providers to ensure allergen information is accurate and accessible.

The school recognises that it is not possible to guarantee an allergen-free environment but will take all reasonable steps to minimise risk.

Food allergy

The school will take appropriate steps to manage the risks associated with food allergies, reduce the risk of exposure to known allergens and ensure that clear, accurate allergen information is available for food provided by the school.

Where a pupil has a diagnosed food allergy:

- Parents/carers must provide accurate and up-to-date medical information, including details of known allergens, symptoms and any prescribed emergency medication.
- The pupil's allergy must be recorded on the school's management information system and an Individual Healthcare Plan (IHP) must be developed where required.
- Relevant staff must be informed of the pupil's allergy before the pupil starts school or as soon as a diagnosis is confirmed.
- Catering staff must receive the information necessary to manage allergens safely and provide accurate allergen information.
- Procedures must be in place to check ingredients, food labels and menu substitutions before food is provided to a pupil with an allergy.
- Appropriate measures must be taken to prevent cross-contamination during food preparation, storage, handling and serving.
- Arrangements for meals, snacks, packed lunches where applicable, celebrations, cooking activities and other food-based activities must be carefully planned.

- Food provided during school events, clubs, trips and off-site activities must comply with the school's allergy procedures.
- Staff must understand the steps needed to reduce the risk of allergen exposure and know how to recognise and respond to an allergic reaction.
- Prescribed emergency medication must be stored and made accessible in accordance with the pupil's healthcare plan and the school's medication procedures. Staff must know what action to take in an emergency, including when to administer emergency medication and call 999.
- Allergy information and healthcare plans must be reviewed when circumstances change and at appropriate intervals, in consultation with parents/carers and relevant healthcare professionals.
- Any allergic reaction or significant near miss must be reported, recorded and reviewed in accordance with the school's procedures.

The school will work in partnership with parents/carers, catering providers and relevant healthcare professionals to support pupils with food allergies and promote their safety and inclusion in school life.

Individual children and young people, staff, governors, volunteers and visitors to the site

Identification and recording of allergies

The school has arrangements in place to identify children and young people, staff, governors, regular volunteers and visitors who have known allergies, identify their known allergens and establish whether they have prescribed emergency medication, such as adrenaline auto-injector (AAI) devices.

Accurate and up-to-date allergy information is essential to minimise the risk of exposure to known allergens and ensure that appropriate action can be taken promptly in the event of an allergic reaction.

Information about children and young people's known allergies will be obtained from parents/carers and, where appropriate, their previous educational setting. Further information may be requested from relevant healthcare professionals where necessary and with appropriate consent.

Individuals will be encouraged to provide accurate information about their allergies, known triggers, symptoms and any prescribed medication or emergency treatment.

Identification arrangements

The school implements the following arrangements:

- Secure allergy register: An up-to-date register of known allergies among pupils, staff, governors and regular volunteers is maintained securely on the school's designated information system, accessible to authorised staff in the administration office and other relevant staff as required.
- Pupil allergy information: Relevant staff will be informed of pupils' known allergies, including the allergens involved, appropriate preventative measures and any emergency action required. Information will be available in classrooms and on the staff notice board, and admin notice board, where necessary to support safe supervision and activities.

- Individual healthcare and allergy action plans: Pupils with allergies will have an Individual Healthcare Plan (IHP), an Allergy Action Plan, or both, as appropriate to their individual needs. These plans will identify known allergens, signs and symptoms of an allergic reaction, prescribed medication and the action to be taken in an emergency.
- Staff and volunteer allergies: Staff, governors and regular volunteers will asked to inform the school about allergies that may require adjustments, emergency planning or other safety measures.
- Visitors and contractors: Visitors and contractors will be provided with an appropriate opportunity to disclose an allergy or relevant medical need that may affect their safety while on site. Where information is disclosed, suitable arrangements will be considered to support their safety and respond to an emergency.
- Supply and temporary staff: Relevant allergy and emergency information will be made available to supply staff, temporary staff and other personnel who are responsible for pupils or may need to respond to an allergic reaction. This information will be provided as part of the induction or handover arrangements.
- Emergency communication: All year groups have phones and can communicate essential allergy information in an emergency, using the school's phone system.
- Medication identification and access: Where an individual has prescribed emergency medication, relevant staff will know where it is stored, how it can be accessed promptly and what action to take in accordance with the individual's healthcare or allergy action plan and the school's medication procedures.
- Off-site activities: Allergy information and emergency arrangements will be communicated to the relevant staff before educational visits, trips, residential stays and other activities taking place away from the school site. Staff will include allergy planning within their trip risk assessment and ensure they have checked the allergy policies for the venues they are visiting.
- Review and updating: Allergy records and associated plans will be reviewed regularly and whenever the school is informed of a new diagnosis, a change in known allergens, a change in prescribed medication or other relevant circumstances.

Confidentiality and information sharing

Allergy information is personal and confidential. It will be stored securely and shared only with staff and other authorised individuals who need the information to protect the health, safety and wellbeing of the person concerned.

Information will be shared in a proportionate and appropriate manner, taking account of data protection requirements and the need to protect individuals in an emergency. Relevant staff must have sufficient information to recognise a potential allergic reaction, take appropriate action and obtain emergency assistance without unnecessary delay.

The school will work with parents/carers, staff and other relevant individuals to ensure that allergy information remains accurate, accessible to those who need it and handled sensitively.

Individual Healthcare Plans

Children and young people should have an Individual Healthcare Plan (IHP) if:

- they have an allergy which has a functional impact on them in their school, college or setting;
- they are at risk of harm as a result of their allergy **and**
- they require arrangements which are additional to or different from those made generally.

The IHP will set out the additional and/or different arrangements that will be in place in the school, for supporting the child or young person with their medical condition or allergy, including in emergency situations.

The IHP will set out how children and young people with allergies requires specific support arrangements, and will have them documented through an **Individual Healthcare Plan**. This includes children and young people whose allergies require flexibility and "reasonable adjustments", as well as those who require medication (either proactively or in an emergency situation).

Where children and young people have an **Allergy Action Plan** and/or **Asthma Action Plan** issued by a healthcare professional, the IHP should refer to or attach it. Whenever an updated Action Plan becomes available, the child or young person's Individual Healthcare Plan should be reviewed to incorporate it.

The plan should include:

- Details of diagnosed allergies.
- Known triggers.
- Signs and symptoms.
- Emergency treatment procedures.
- Medication required.
- Location of medication.
- Contact details.
- Medical professional guidance where available.
- Review date.

Plans will be:

- agreed with parents/carers;
- reviewed annually or sooner if circumstances change;
- accessible to relevant staff.

Prescribed adrenaline

The school will ensure that children and young people who are prescribed adrenaline devices have rapid access to their devices **at all times**, noting that in a case of anaphylaxis, adrenaline should be administered within five minutes. This includes in the lunch area, playground and sports fields or when on visits or trips.

Where prescribed, pupils' adrenaline auto-injectors (AAIs) must:

- be provided by parents/carers;
- remain in date;
- be clearly labelled;
- be easily accessible at all times; in class medical cabinets and in the school medical office
- accompany the child during off-site visits.

Staff must know which manufacturer the epipen comes from as this affects the administering time.

An AAI dated register is kept on file in school pool in the admin office with expiry dates for the pens kept on record. The admin officer will alert families when the expiry date reaches 2 months before, via a schedule sent email system.

Staff will not delay administration where anaphylaxis is suspected.

Emergency services will always be called immediately following administration of adrenaline.

Records will be kept on medi-tracker when children and young people have been provided with their prescribed adrenaline devices.

It is the parent / carers responsibility to have an epipen on them for children's journeys to and from school.

When leaving Chandlers Ford Infant School, parents will take all individually prescribed adrenaline devices home ready to take to the children's next setting.

School-wide policies

"Spare" adrenaline devices

There will always be 2 additional, un-prescribed, AAI's onsite at all times. These "spare" adrenaline devices will be used and managed, including:

- "Spare" adrenaline devices should only be used in an emergency to treat a suspected severe allergic reaction (anaphylaxis) when a pupil's own prescribed device is missing, broken, out of date, misfired, or cannot be administered without dangerous delay. Advanced permission from parents / carers will be obtained on IHPs.
- "Spare" adrenaline devices have been clearly marked "emergency anaphylaxis kit" containing the spare adrenaline devices, any emergency asthma reliever inhaler and spacers and instructions for their use. "Spare" adrenaline devices are stored in pairs, so that if a second one is necessary it is on hand rather than needing to be obtained from elsewhere on site; "Spare" adrenaline devices are located in the medical room
- As above, an AAI Adrenaline devices and salbutamol inhalers are checked to confirm that they are in date and recorded on the dates register on school pool in the admin office. Replacement notification emails are sent 2 months in advance.
- disposal of used devices will be handed directly to the paramedics or emergency medical staff at the scene or at the hospital emergency department so they can manage it safely and document the treatment.
- disposal of expired or damaged devices: will be disposed of by taking them to our local pharmacist. They accept these via pharmaceutical waste routes.

Visits and trips

All educational visits must consider allergy safety. Trip co-ordinators must discuss allergy protocol with the setting prior to booking. Risk assessments will be conducted for any child or young person at risk of anaphylaxis taking part in a trip off the premises.

Visit leaders will:

- review Individual Healthcare Plans;
- complete suitable risk assessments and include allergies within trip risk assessments;

- ensure adrenaline devices accompany the pupil;
- identify trained accompanying staff;
- consider food arrangements;
- identify emergency medical facilities where appropriate;
- brief volunteers and accompanying adults where necessary.

No pupil should be excluded from educational visits solely because of an allergy unless a risk assessment demonstrates that reasonable adjustments cannot adequately manage the risk. Children and young people at risk of anaphylaxis should have a trained adult carrying their adrenaline device with them, and there will be staff trained to administer adrenaline in an emergency.

Serious incidents and “near misses”

The school records, reports and responds to serious incidents or “near misses” involving allergy safety through accounting it on medi-tracker.

Emergency Response plan:

If anaphylaxis is suspected:

1. Administer adrenaline immediately.
2. Call 999.
3. State that anaphylaxis is suspected.
4. Contact parents/carers.
5. Monitor the pupil continuously.
6. Administer a second adrenaline auto-injector if symptoms persist and medical advice indicates.
7. Record the incident and review procedures afterwards.

All allergic reactions, including near misses, will be recorded on medi-tracker.

The school will:

- investigate contributing factors;
- identify learning opportunities;
- review risk assessments;
- update healthcare plans where required;
- inform governors where appropriate;
- share learning with staff.

Serious incidents should be reported in accordance with statutory reporting requirements and local authority procedures where applicable.

Information sharing

A child or young person’s health information is considered special category data under UK GDPR, which means it is highly sensitive and has additional legal protections. Schools have a lawful basis to hold, use and share a child’s special category health data when this is necessary, but it should always be done in a controlled and respectful way, because unnecessary sharing can reduce children’s confidence in practitioners and can be embarrassing for children and young people who may not want to be singled out.

Parents/carers are responsible for informing the school immediately of any changes to their child's allergy or medication.

Awareness of the allergy safety policy

All staff should be aware of and understand the policy, as part of annual allergy awareness training. The school will ensure this policy is understood by the whole school community.

This includes:

- annual staff awareness sessions;
- induction for new staff;
- appropriate pupil education, including sensitive support from peer group
- communication with parents;
- governor oversight;
- regular policy review (part of annual governors' cycle)