CULCHETH HIGH SCHOOL

› THE BEST THAT WE CAN BE

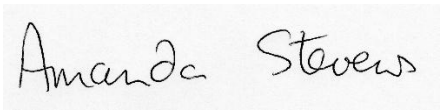
Allergy & Asthma Awareness Policy

Reviewer: **Mr J Morris**

(H&S coordinator)

Reviewed: **F&R Committee**

RATIFIED BY THE GOVERNING BODY ON

Signed: 

(Chair of Finance and Resources Committee)

Date: 20th November 2026

› RESPECT
› HONESTY
› EXCELLENCE

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Allergy & Asthma Awareness Policy

1. Policy Overview

Culcheth High School is committed to providing a safe, inclusive, and accessible environment for all students. In line with statutory duties under the Children and Families Act and the 2026 DfE Statutory Allergy Guidance (Benedict's Law), this policy outlines our whole-school approach to preventing, recognising, and responding to severe allergic reactions (anaphylaxis) and asthma attacks. This policy will be reviewed annually or following a relevant update, whichever comes first.

2. Awareness Training

All staff present during times when students are scheduled to be on site will receive allergy awareness training. 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 during our school opening hours. This does not include contractors carrying out work with no student-facing roles such as builders, electricians or other ad hoc maintenance personnel.

For our permanent and fixed term staff, the annual training will form part of our mandatory training requirements, completing annual allergy and anaphylaxis awareness training and asthma awareness training. This will be completed in the start of each new school year in term one, or within the first term of a new employee starting at Culcheth High School. Training will take comprise of Allergy and Asthma Awareness training, through online training courses on our training platform, The National College. Additional in-person training will be delivered by the school's Health and Safety lead to raise awareness, allow staff to ask questions and give guidance of the online training required.

For new staff, the training will form part of the induction process along with the other mandatory annual training courses, to be completed in their first working term.

Supply, cover and volunteers who are working with the school on a none 'one-off' basis, will be asked to complete this training through our e-learning platform, if not already done and able to provide a completed certificate, valid within the last year. Those who are attending site as a 'one off', will be provided with a fact sheet.

Allergy awareness training will ensure 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
    - How to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack)
- 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 student's wellbeing
- Understand the school'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 must be understood as allergy awareness and emergency response training for all staff. It does not replace any separate clinical governance, competency or delegation arrangements that may be needed, where a student requires individual healthcare support beyond school-level allergy safety arrangements. This training does not qualify staff or provide the formal authorisation to manage complex, individual medical needs that fall outside standard school allergy protocols.

3. Wellbeing

As a school we acknowledge that the risk of anaphylaxis is a significant source of anxiety. Through our pastoral care team, support for those students with an allergy, including asthma, will be available to provide understanding and solutions to the issues the students may face. We will ensure that our students are not excluded from school trips, visits, or extracurricular activities due to their medical condition.

Bullying of students due to their allergy, will be addressed by following our antibullying procedures.

Education of students in relation to the dangers of allergies to help avoid bullying, will be addressed through education in our curriculum and pastoral activities, such as assemblies and Personal Development.

4. Minimising Risk

The school's catering service will follow Health and Hygiene measures, to manage the risks of exposure to a food allergen through food provided by the school catering service.

The "No Food Sharing" rule will help to manage the risks of exposure to a food allergen through food, with staff being vigilant to stop food sharing when seen, when brought in by others.

Where students have a known allergy to airborne or contact allergens, the school will endeavour to avoid these risks being brought to the site. Our air filtering systems, hand washing and cross contamination prevention measures, aid to minimise students being exposed to such allergens, which may be brought to school without our knowledge.

All staff planning an activity will consider the risk of exposure to allergens with all in-school activities.

Specific risk assessments will be made to manage the risks of exposure to allergens in individuals with an allergy when planning external visits or trips.

5. Food Allergy

The school's catering service contractors follow Health and Hygiene measures, to manage the risks of exposure to a food allergen through food provided by the school. Where possible foods which are known to cause allergies will be avoided, when possible. Any food which can cause an allergic reaction will be clearly labelled. In addition, our school till system shows allergies as each child's account to pay is accessed. This further reduces the risk of exposure to an allergy for the student.

The school's catering service will manage the below:

- Natasha's Law Compliance: All food prepared and pre-packed on-site (PPDS) for grab-and-go will be labelled as required by law and food hygiene compliance.

The school will manage the below:

- The "No Food Sharing" Rule: While secondary students are more independent, food-sharing is strictly prohibited to prevent accidental cross-contamination.
- Food Technology & Science Labs: Lessons involving food preparation or chemical triggers will be risk-assessed. Alternative ingredients will be provided for students with documented allergies.
- Social & Charity Events: Bake sales, reward treats, and tuck shops will explicitly declare allergen content. High-risk allergens (e.g., loose nuts/peanuts) are restricted across the school site.
- Environment & Air Quality (Asthma Management)
- Triggers: The school will monitor and minimise environmental triggers such as damp, strong chemical fumes (cleaning products/science labs), and intense physical exertion without preparation.
- PE & Games: Staff will verify that students with asthma have their prescribed reliever inhaler present on the field or court before any physical activity begins.

6. Individual Children and Young People

a. Identification

Parents / carers will be asked to fill out a data collection form ahead of their child starting at Culcheth High School. This form includes questions regarding allergies and asthma. Once the form is received, the administration team will process this information, adding allergies and asthma on our SIMs database. This data collection also requires the parent / carer to confirm what medication their child requires, including adrenaline autoinjectors (AAI) devices. PE staff, check with students with asthma, that they have their inhaler present before lessons. Each student with an allergy or asthma diagnosis will have an Individual Healthcare Plan created.

Staff are asked to complete a medical questionnaire as part of their employment checks, which is added to the school's SIMs database.

Visitors attending site will be asked to share allergy and asthma needs, as part of invitation to attend our site for activities.

Allergy information is added to the catering system for staff and students, with random checks made to ensure this information has copied to the system correctly. Visitors' allergy information is collected and passed to our catering company.

b. Individual Healthcare Plans (IHPs)

Students will have an Individual Healthcare Plan (IHP) if:

- they have an allergy which has a functional impact on them in school;
- 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 school, for supporting the students with their medical condition or allergy, including in emergency situations and any specific support required. 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 will refer to or have it attached.

- Every student with a diagnosed allergy or asthma will have a comprehensive Individual Healthcare Plan (IHP), incorporating a clinician-signed BSACI Allergy Action Plan.
- IHPs will detail exact triggers, past presentation of symptoms, medication dosages, and whether the student self-carries or relies on stored medication.
- Information is securely digitised and made instantly visible to all relevant teaching, supply, and catering staff via the school management system (SIMS).

Whenever an updated Action Plan becomes available, the students Individual Healthcare Plan will be reviewed to incorporate it.

c. Prescribed adrenaline

Students should self-carry their emergency medication (two Adrenaline Auto-Injectors (AAIs). However, the school maintains central, easily accessible backups at Student Services and the Medial Room at Main Reception. In a case of anaphylaxis, adrenaline should be administered within five minutes. This five-minute provision should accessible in all areas on site, including during break and lunchtimes, in all indoor and outdoor spaces, sports fields, and when on visits or trips.

Students are to take individually prescribed adrenaline devices home (for example at the end of the day for the journey home) and parents must check that they remain in date.
The school check their autoinjectors and inhalers for date of expiration weekly, as part of the weekly administration checks, requesting replacements when less than three months is noted.
A record will be kept of which student has been provided with prescribed adrenaline devices (and an Allergy Action Plan) on SIMs and within their Individual healthcare plan.

7. School-Wide Policies

a. Spare adrenaline devices

Our school has two sets of spare adrenaline devices. These are:

- To be used in the event that a person who is suffering an allergic reaction does not have their autoinjector with them, has only one which has been used and requires a second injection, and should be injected into the person's thigh, by themselves if they

are able to, or by any person providing support, should the person experiencing the allergic reaction, not be able to do this themselves.
- spare adrenaline devices are stored at Student Services and the medial room at Main Reception
- spare adrenaline devices and salbutamol inhalers will be checked weekly to confirm that they are in date
- spare adrenaline devices and salbutamol inhalers will be replaced when there are three months date remaining. Once a device is used, it will be replaced as soon as the pharmacy is able to supply the replacement.
- Used devices will be given to the attending medical staff, who have been called to assist, so the device can be taken with the individual to hospital.
- Unused, out of date devices will be disposed of via the local pharmacy.

The locations of the spare adrenaline devices and salbutamol inhalers have been chosen to ensure no person requiring one, is more than five minutes from access to these, no matter where they are on our school site. Adrenaline devices are stocked and stored in pairs in both locations.

When storing spare adrenaline devices:

- spare adrenaline devices are readily accessible at both locations, supervised by staff.
- In the event of an anaphylaxis, adrenaline should be administered as soon as possible. In practice, this should be no more than five minutes, i.e. adrenaline devices will be brought to the person having anaphylaxis within 5 minutes. This is achieved through the use of the schools' radio and telephone systems, allowing staff quick communication to both locations, without time being spent traveling to and from the person experiencing anaphylaxis. A member of staff from the location closest to the person requiring the autoinjectors, will take the pair of autoinjectors to the location. This will allow a second dose to be administered if required without delay. All staff at both locations are also first aid trained. further assistance will be communicated and additional support dispatched to assist.
- Students are required to keep their own personal medication, including autoinjectors with them. However, if there is an individual requirement for the school to keep any medication in a central location, including autoinjectors for a student, personal medication is stored separately to the spare adrenaline devices, and are clearly labelled, to avoid any confusion with adrenaline devices prescribed to a named person.

b. Visits and trips

Students attending visits and trips, will have their IHP and medical collection forms checked, to ensure adaptations can be made to allow them to participate in the visit / trip, and do so Safely. This will include ensuring the provision of access to adrenaline autoinjectors where required.

As part of the visit / trip, a risk assessment is always completed, which incorporates the assessment of each student's individual medical needs, with adaptations as required for those with allergy / asthma needs, to ensure they can participate in the fullest. Checks will be made with students at risk of anaphylaxis, ensuring they have their own adrenaline device with them, and first aid trained staff will be available to administer adrenaline in an emergency.

c. Serious incidents and "near misses"

Our school will follow the Warrington Borough Council's procedure for reporting accident, incidents and near misses, completing and submitting the relevant HSA form. As part of this, the form allows the recording of the incident or near miss, a way to centrally report this to the councils' Health and Safety team, and what response as a school we have taken, along with future changes which may be needed to prevent / reduce the chance of a repeat incident or near miss. This is reviewed by the councils' Health and Safety team, who will give further guidance and support if required. The recording and reporting procedure captures incidents and near misses including those pertaining to allergy safety.

In some cases, the impact of exposure to an allergen while in school, on a visit or trip, may not be recognised until the student is back at home. Parents are encouraged to keep school updated with any medical changes, which includes allergy and asthma issues. Any changes are recorded on the students SIMs file, reviewed within their IHP or a IHP created if a new change is recorded which would require an IHP. Any reported incident or near miss by the school, is followed up by the school with the student / parent to ensure we have all relevant information, allowing future incidents or near misses to be avoided / reduced where practicably possible.
A copy or summary of any relevant information set out in a medical conditions or medication policy will be added to the students record.

d. Information sharing

Our school shares information about students with allergies through a variety of ways. The details are shared through their SIMS record in the medical needs section, IHPs shared with staff for each student and is shared to the catering system showing allergy information as part of accessing all staff and student accounts for payment.
For more sensitive, complex or higher detailed information provided by a medical professional, a summary of the needs will be recorded, noting the location of the relevant medical report, to comply with our Data Protection Policy.

Under UK GDPR, a student's health information is considered special category data 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 is always be done in a controlled and respectful way, because unnecessary sharing can reduce a student's confidence in practitioners, and can be embarrassing for students who may not want to be singled out.

e. Awareness of the allergy safety policy

Our school will share this policy with all staff via email, briefings and as part of the staff induction process. A copy of the allergy safety policy will be published on the school's website. All staff will be made aware of the policy as part of annual allergy awareness training, allowing time for staff to raise questions as they need, at anytime of the year.

Awareness of allergy safety will be raised with each individual student, especially those with prescribed adrenaline devices. They will be encouraged to share this with their friends, so they are aware of how to seek help in an emergency. Wider awareness or training will be considered carefully and discussed with the student and their parents, in addition to staff emergency response arrangements.