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Allergy Policy

St Aubyn's School

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1. Aims

This policy aims to:

- Set out that St Aubyn's is a nut and sesame free school. This means that no nuts or sesame are served or allowed on the school premises. This must be consistently communicated with parents, pupils and staff.
- Set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community through regular updates, lessons and parental communication.
- Make clear how communication with families regarding allergy management works and the expectations of families and the school in terms of the support given

2. Legislation and guidance

This policy is based on the Department for Education's guidance on [allergies in schools](#) and [supporting pupils with medical conditions at school](#), the Department of Health and Social Care's guidance on [using emergency adrenaline auto-injectors in schools](#), and the following legislation:

- [The Food Information Regulations 2014](#)
- [The Food Information \(Amendment\) \(England\) Regulations 2019](#)

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy leads will be the School Nursing Team.

They will be supported by the Deputy Head (Admin).

They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils
- Reviewing any catering or menu needs with families of children with allergies
- Being the point of contact for families and the catering team, liaising with both to ensure up to date information and support is in place
- Coordinating the paperwork and information from families
- Coordinating medication with families
- Keeping stock of the school's adrenaline auto-injectors
- Checking spare AAls are in date

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils with severe allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy training, to be determined by Allergy Leads.
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment

➤ –

- Regularly reviewing and updating the allergy policy, usually annually but more often if required.

3.2 Teaching and support staff

All teaching and support staff are responsible for:

- Being aware of specific pupils with allergies in their care and maintaining a safe and inclusive classroom environment
- Promoting and maintaining allergy awareness among pupils, through avenues such as assembly and PSHE lessons.
- Ensuring the wellbeing of pupils with allergies
- Maintaining awareness of our allergy policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Carefully considering the use of food or other potential allergens in lesson and activity planning and producing risk assessments where this is the case

3.3 Designated members of staff

In addition to the responsibilities of teaching and support staff, 'designated members of staff' will also be responsible for helping to administer AAls. These are members of staff who have volunteered and been trained to help pupils with AAls in an emergency. These staff will all hold a current First Aid certificate and be on the First Aiders list. ***As this policy is introduced, staff will undergo training as soon as possible to fulfil this role.***

3.4 Parents

Parents are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school's guidance on food brought in to be shared, which states that no outside food is permitted. ➤ Updating the school on any changes to their child's condition
- Communicating with the Allergy Lead, when requiring information or updating the school regarding matters regarding their child's allergies

3.5 Pupils with allergies

These pupils are responsible for (as much as possible, with regards to the age of the child): ➤ Being aware of their allergens and the risks they pose

- Understanding how and when to use their adrenaline auto-injector, at an age-appropriate level and after discussion with their parents.
- If age-appropriate and if the pupil is happy and comfortable to do so, carrying their adrenaline auto-injector on their person and only using it for its intended purpose – for Year 6 pupils only (designated members of staff are still expected to help administer the AAI if the pupil is not able to do so)

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Creating a safe and inclusive environment for children with allergies, in line with our School Promises Older pupils might also be expected to support their peers and staff in the case of an emergency.

4. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in: ➤ Lessons such as food technology

- Science experiments involving foods ➤ Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

5. Managing risk

5.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating ➤ Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 Catering

This responsibility in regards to this area of the policy is delegated to the Holroyd Howe, the catering company that works with the School.

The school is committed to providing safe, inclusive and varied food options to meet the dietary needs of pupils with allergies. In communication with the caterers, due attention will be paid to ensuring alternative food options match the school menus as closely as possible.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- School menus are available for parents to view with ingredients clearly labelled wherever practicable
- Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all [legal requirements](#) that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination
- Different coloured trays are given to pupils with food allergies so that it is clear for staff that additional care and attention is needed for those pupils

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, the school does not allow pupils to bring in their own foods at any point. This is reinforced through consistent messaging, all food is provided for pupils during the day directly by the school and in line with this policy.

5.4 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- Any child that is bitten or stung will know to inform a member of staff who will send them to the medical room for evaluation, with due reference to allergy information

5.5 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher
- The availability of appointments with school counsellors should they be required

5.6 Events and school trips

- For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part
- The school will plan accordingly for all events and school trips and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training

- Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

This section should be read in conjunction with the [School Medical Conditions Policy](#)

6.1 Register of pupils with AAI

- The school maintains a register of pupils who have been prescribed AAI or where a doctor has provided a written plan recommending AAI to be used in the event of anaphylaxis. This is controlled by the School Nursing Team. The register includes:
 - Known allergens and risk factors for anaphylaxis
 - Whether a pupil has been prescribed AAI(s) (and if so, what type and dose) or, if a pupil does not have a prescribed AAI, but has a BSACI plan which states they should be given one of the School's spare, back-up AAI in the event of them suffering an anaphylactic reaction.
 - Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI which may be different to the personal AAI prescribed for the pupil
 - A photograph of each pupil to allow a visual check to be made
 - The register is kept electronically on the school system and in paper form in the Medical Room. It can be checked quickly by any member of staff as part of initiating an emergency response

6.2 Allergic reaction procedures

- As part of the whole-school awareness approach to allergies, all staff are aware of how to recognise and respond to a pupil or adult having an allergic reaction. Designated members of staff are trained in the administration of AAI – see section 7
- If a pupil has an allergic reaction, the staff member will initiate the School's Anaphylaxis Emergency Procedure following the pupil's allergy action plan
 - If an AAI needs to be administered, a designated member of staff member will use the pupil's own AAI, or if it is not available, a school one. It will only be administered by a designated member of staff trained in this procedure
- If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy
 - At times, children with allergies are also prescribed a rescue inhaler and antihistamines. Staff should be aware of these pupils as a part of their risk assessment of all medical conditions in their class
 - ➤ If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance
- If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be treated in accordance with their allergy action plan, monitored and the parents informed. It may be appropriate for antihistamine and inhaler to be given at this stage. If the pupil is not known to suffer from severe allergies, they will be treated according to the instructions on the Medical Conditions List (MCL).

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAI

The School Nurse is responsible for buying AAI and ensuring they are stored according to the guidance.

On the 1 October 2017, new Guidelines were issued by The Department of Health allowing schools to keep AAI for emergency use.

The emergency AAI should only be used for children, for whom written parental consent for use of the emergency AAI has been given, who have been diagnosed with anaphylaxis and prescribed an AAI and their own AAI is **unavailable**, has been misplaced, broken or is out of date. The names of these children must be kept on an Anaphylaxis register. This register will be kept with the emergency AAI, will be on the Network, or available from the School Nurse. Guidance notes (Appendix 6 and 7) will be kept with the AAI's and displayed on the Network.

The emergency AAI's will be kept in the Medical Room and kitchen. Sports staff taking a pupil with a previously prescribed AAI to an away fixture must check before leaving that a pupil has their own AAI and it is in working order. As with all medication, a written record must be made if the emergency AAI is used and the parents informed.

Following the issue of the guidelines outlined above, many local authorities are refusing to allow GP's to prescribe AAI's for a child to keep at school. Therefore some children may need to use the school emergency AAI. This is clearly indicated on their individual AAP.

The emergency AAI should only be used for those children on the Anaphylaxis register, however, in the event of a possible severe allergic reaction in a pupil who does not meet the above criteria, Emergency Services (999) should be contacted and advice sought from them as to whether administration of the spare emergency AAI is appropriate.

7.2 Storage (of both spare and prescribed AAI's)

The allergy lead will make sure all AAI's are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children. Named, prescribed AAI's for children in EYDS, Pre Prep and Upper Prep are kept in the class asthma/allergy box, except for Year 6 pupil's who's AAI's are kept in the Medical Room. Where pupils have a second AAI, this is kept in the Medical Room in an unlocked, clearly labelled cupboard.
- **Not** locked away, but accessible and available for use at all times
- **Not** located more than 5 minutes away from where they may be needed

Spare AAI's will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAI's)

The School Nurse and the Allergy Leads are responsible for checking monthly that:

- The AAI's are present and in date
- Replacement AAI's are obtained when the expiry date is near

7.4 Disposal

AAI's can only be used once. Once a AAI has been used, it will be disposed of in line with the manufacturer's instructions

7.5 Use of AAI's off school premises

- Pupils at risk of anaphylaxis who are able to administer their own AAI's are able to carry their own AAI with them on school trips and off-site events when in Year 6, if they feel comfortable in doing so. Otherwise, staff will carry pupil's AAI's. Younger pupils' have their AAI with them in the class medical box.
- A member of staff trained to administer AAI's in an emergency should be present on school trips and off-site events

7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. These are kept in the Medical Room and kitchen. This includes:

- Spare AAI's
- Instructions for the use of AAI's
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A list of pupils to whom the AAI can be administered
- A record of when AAI's have been administered

8. Training

The school is committed to training all staff in allergy recognition and response. This

- includes:
- How to reduce and prevent the risk of allergic reactions
 - How to spot the signs of allergic reactions (including anaphylaxis)
 - Where AAI's are kept on the school site, and how to access them
 - The importance of acting quickly in the case of anaphylaxis
 - The wellbeing and inclusion implications of allergies

Training will be carried out at least annually by the Allergy Leads.

9. Links to other policies

This policy links to the following policies and procedures:

Health and safety policy

School medical policy

Appendices:

See below:

A - What are the symptoms of Anaphylaxis?

B- How to use an adrenaline auto-injector

What are the symptoms of anaphylaxis?

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| <p>Mild/moderate allergic reaction</p> <ul style="list-style-type: none"> Swollen lips, face or eyes Itchy/tingling mouth Hives or itchy skin rash Abdominal pain or vomiting Sudden change in behaviour | <p>Action</p> <ul style="list-style-type: none"> Stay with the casualty, call for help if necessary Locate adrenaline autoinjector(s) Give antihistamine Phone emergency contact If vomited can repeat antihistamine dose Monitor closely and be ready to give adrenaline immediately if symptoms worsen |
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Watch for signs of ANAPHYLAXIS

(life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has SUDDEN BREATHING DIFFICULTY

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| <p>Airway</p> <ul style="list-style-type: none"> Vocal changes (hoarse voice) Persistent cough Difficulty in swallowing Swollen tongue | <p>Breathing</p> <ul style="list-style-type: none"> Difficult or noisy breathing Wheezing (like an asthma attack) | <p>Consciousness</p> <ul style="list-style-type: none"> Persistent dizziness Suddenly sleepy Collapse, unconscious Pale or floppy |
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IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT

- 1 Lie casualty flat with legs raised** (if breathing is difficult, allow casualty to sit)
 
- 2 Use Adrenaline autoinjector without delay**

- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")**


AFTER GIVING ADRENALINE:

- Stay with casualty until ambulance arrives, **do NOT stand casualty up**
- If no improvement after 5 minutes, give a **2nd adrenaline dose** using a second autoinjector device, if available
- Commence CPR if there are no signs of life.



You can dial 999 from any phone, even if there is no credit left on a mobile.
Medical observation in hospital is recommended after anaphylaxis.

IF IN DOUBT, GIVE ADRENALINE >

How to use an adrenaline autoinjector

(EpiPen, Jext or Emerade)



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| <p>1.</p>  <p>Hold in your dominant hand</p> | <p>2.</p>  <p>Remove the cap with your other hand</p> |
| <p>3.</p>  <p>Swing and jab the tip of the autoinjector into your upper, outer thigh (with or without clothes, but avoiding seams)</p> | <p>4.</p>  <p>Hold the injection in place for 10 seconds</p> |
| <p>5.</p>  <p>Massage the injection site for 10 seconds</p> | <p>6.</p>  <p>Phone for an ambulance</p> |

Epipens only need to be held against the thigh for 3 seconds and you don't need to massage the site afterwards