

Acorn Trust

Allergen and Anaphylaxis

Policy



Written by:	J Buckley, Trust Business Manager
Date agreed:	Spring 2020
Next Review Date:	Spring 2023
CEO Signature	

Mission Statement

The Acorn Trust is a Multi-Academy Trust established with the aim of providing outstanding learning and opportunities for the children within its care.

Children are our nation's most precious resource. Their school life and learning experience will shape them for the whole of their lives

Safeguarding Statement

At the Acorn Trust we recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

We work to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice.

The procedures contained in the Safeguarding Policy apply to all staff, volunteers and governors

Version Control

Change Record

Date	Author	Version	Section	Reason for Change
Feb 2020	J Buckley	1		Policy adopted using School Bus template as decision made to create 2 separate policies – Allergens and Whole Food (was one before)

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Statement of intent

The Acorn Trust strives to ensure the safety and wellbeing of all members of the school community. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of anaphylaxis occurring whilst at school.

In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The school does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

1. Legal framework

- 1.1. This policy has due regard to legislation and government guidance including, but not limited to, the following:
 - The Human Medicines (Amendment) Regulations 2017
 - Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
 - DfE (2015) 'Supporting pupils at school with medical conditions'
- 1.2. This policy will be implemented in conjunction with the following school policies and documents:
 - Health and Safety Policy
 - Whole-School Food Policy
 - Administering Medication Policy
 - Supporting Pupils with Medical Conditions Policy
 - Educational Visits and School Trips Policy
 - Register of AAls
 - AAI Record

2. Definitions

For the purpose of this policy:

- 2.1. **Allergy** – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.
- 2.2. **Allergen** – is a normally harmless substance that triggers an allergic reaction for a susceptible person.
- 2.3. **Allergic reaction** – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:
 - Hives
 - Generalised flushing of the skin
 - Itching and tingling of the skin
 - Tingling in and around the mouth
 - Burning sensation in the mouth
 - Swelling of the throat, mouth or face
 - Feeling wheezy
 - Abdominal pain
 - Rising anxiety
 - Nausea and vomiting
 - Alterations in heart rate
 - Feeling of weakness

2.4. **Anaphylaxis** – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:

- Difficulty breathing
- Feeling faint
- Reduced level of consciousness
- Lips turning blue
- Collapsing
- Becoming unresponsive

3. Roles and responsibilities

3.1. The headteacher at each of the Acorn Trust's schools is responsible for:

- The development, implementation and monitoring of the Allergen and Anaphylaxis Policy.
- Ensuring that parents are informed of their responsibilities in relation to their child's allergies.
- Ensuring that all school trips are planned in accordance with the Educational Visits and School Trips Policy, taking into account any potential risks the activities involved pose to pupils with known allergies.
- Ensuring that the Whole-School Food Policy and the associated protocols are effectively implemented, including those in relation to labelling foods that may contain common allergens, e.g. nuts.
- Ensuring that all designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
- Ensuring that catering staff are aware of, and act in accordance with, the school's policies regarding food and hygiene, including this policy.
- Ensuring that catering staff are aware of any pupils' allergies which may affect the school meals provided.
- Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff.
- Seeking up-to-date medical information about each pupil via a medical form sent to parents on an annual basis, including information regarding any allergies.
- Ensuring First Aiders understand the action to take and processes to follow in the event of a pupil going into anaphylactic shock, and ensuring that this information is passed onto staff members.

3.2. All staff members are responsible for:

- Acting in accordance with the school's policies and procedures at all times.
- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual healthcare plans (IHPs) as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Promoting hand washing before and after eating.
- Monitoring all food supplied to pupils by both the school and parents, including snacks, ensuring food containing known allergens is not provided.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
- Ensuring that any necessary medication are out of the reach of pupils but still easily accessible to staff members.

3.3. All parents are responsible for:

- Notifying the **school** of the following information:
 - Their child's allergens
 - The nature of the allergic reaction
 - What medication to administer
 - Specified control measures and what can be done to prevent the occurrence of an allergic reaction
- Keeping the school up-to-date with their child's medical information.
- Providing written consent for the use of a spare AAI.
- Providing the school with up-to-date emergency contact information.
- Providing the school with written medical documentation and any necessary medication, including instructions for administering as directed by the child's doctor.
- Communicating to the school any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen.
- Working alongside the school to develop an IHP to accommodate the child's needs, as well as undertaking the necessary risk assessments.
- Acting in accordance with any allergy-related requests made by the school, such as not providing nut-containing items in their child's packed lunch.

- Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
- Providing a supply of 'safe' snacks for any individual attending school events.
- Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided.

3.4. All pupils are responsible for:

- Ensuring that they do not exchange food with other pupils.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Being proactive in the care and management of their allergies.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- Learning to recognise personal symptoms of an allergic reaction.
- Keeping necessary medications in an agreed location which members of staff are aware of.
- Developing greater independence in keeping themselves safe from allergens.
- Notifying a staff member if they are being bullied or harassed as a result of their allergies.

4. Food allergies

From the 13th Dec 2014, the EU food information for Consumer Regulation No 1169/2011 came into force requiring any catering providing "loose food" (such as school meals, sandwiches wrapped on site and snacks) to declare the presence of allergenic ingredients used in their preparation.

There are 14 common food allergens that need to be identified when used as ingredients:

- Cereals containing gluten
- Crustaceans
- Molluscs
- Eggs
- Fish
- Peanuts
- Nuts
- Soybeans
- Milk

- Celery
- Mustard
- Sesame
- Lupin
- Sulphur Dioxide (at levels above 10mg/kg or 10mg/litre expressed as SO₂).

The Acorn Trust has decided to declare any of these allergens in the following way:

School Lunches

All allergens that are used as ingredients in a school lunch will be declared on the Lunchshop website.

All other food served within school

Allergy information for all children will be requested on an annual basis by all schools within the trust. Notices are displayed throughout the schools and letters are sent to notify parents that food used within school could contain any of the 14 allergens.

- Parents will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.
- Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service.
- Where a pupil who attends the school has a nut allergy, the school's catering service will be requested to eliminate nuts, and food items with nuts as ingredients, from meals as far as possible, not including foods which are labelled 'may contain traces of nuts'.
- All food tables will be disinfected before and after being used.
- Anti-bacterial wipes and cleaning fluid will be used.
- Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.
- There will be a set of kitchen utensils that are only for use with the food and drink of the pupils at risk.
- There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products.
- Food items containing bread and wheat will be stored separately.
- Food items containing nuts will not be served at, or be bought onto, school premises.
- The chosen catering service of the school is responsible for ensuring that the school's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.
- Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

5. Animal allergies

- 5.1. Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

- 5.2. In the event of an animal on the school site, staff members will be made aware of any pupils who this may pose a risk to and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

6. Seasonal allergies

- 6.1. The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.
- 6.2. Precautions regarding the prevention of seasonal allergies include ensuring if applicable that grassed areas are not mown whilst pupils are outside.
- 6.3. Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.
- 6.4. Pupils will be encouraged to wash their hands after playing outside.
- 6.5. Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the site manager.
- 6.6. The site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.
- 6.7. Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

7. Adrenaline auto-injectors (AAIs)

- 7.1. Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.
- 7.2. Under The Human Medicines (Amendment) Regulations 2017 the schools is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.
- 7.3. The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.
- 7.4. The school will purchase AAIs in accordance with age-based criteria, relevant to the age of pupils at risk of anaphylaxis, to ensure the correct dosage requirements are adhered to. These are as follows:
 - **For pupils under age 6: 0.15 milligrams of adrenaline**
 - **For pupils aged 6-12: 0.3 milligrams of adrenaline**
- 7.5. For pupils under the age of seven who have prescribed AAI devices, these are stored in a suitably safe and central location: the school office.

- 7.6. Spare AAI's are not located more than five minutes away from where they may be required. The emergency AAI can be found at the school office.
- 7.7. All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.
- 7.8. In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.
- 7.9. Any used or expired AAI's are disposed of after use in accordance with manufacturer's instructions.
- 7.10. Used AAI's may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with section 12 of this policy.
- 7.11. A sharps bin is utilised where used or expired AAI's are disposed of on the school premises.
- 7.12. Where any AAI's are used, the following information will be recorded:
 - Where and when the reaction took place
 - How much medication was given and by whom
- 7.13. Spare AAI's are only accessible to pupils for whom medical authorisation and written parental consent has been provided – this includes pupils at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.
- 7.14. Parents are required to provide consent on an annual basis to ensure the register remains up-to-date.

8. Medical attention and required support

- 8.1. Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents, the pastoral manager and where necessary the relevant classroom teacher, in which the pupil's allergies will be discussed and a plan of appropriate action/support will be developed.
- 8.2. Parents will provide the school with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.
- 8.3. Pupils will not be able to attend school or educational visits without any life-saving medication that they may have, such as AAI's.
- 8.4. All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.
- 8.5. Any specified support which the pupil may require is outlined in their IHP.

- 8.6. All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's IHP.

9. Staff training

- 9.1. Designated staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so.

- 9.2. Designated staff members will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAIs according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.

- 9.3. All staff members will:

- Be trained to recognise the range of signs and symptoms of an allergic reaction.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild-moderate symptoms.
- Understand that AAIs should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a pupil is on the Register of AAIs.
- Understand how to access AAIs.
- Understand who the designated members of staff are, and how to access their help.
- Understand that it may be necessary for staff members other than designated staff members to administer AAIs, e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation.
- Be aware of how to administer an AAI should it be necessary.
- Be aware of the provisions of this Allergen and Anaphylaxis Policy.

10. In the event of a mild-moderate allergic reaction

- 10.1. Mild-moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

- 10.2. If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and call for help from the designated staff members able to administer AAIs.

- 10.3. The pupil's prescribed AAI will be administered by the designated staff member. Spare AAIs will only be administered where appropriate consent has been received.
- 10.4. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI.
- 10.5. The pupil's parents will be contacted immediately if a pupil suffers a mild-moderate allergic reaction, and if an AAI has been administered.
- 10.6. In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.
- 10.7. For mild-moderate allergy symptoms, the AAI will usually be sufficient for the reaction; however, the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.
- 10.8. Should the reaction progress into anaphylaxis, the school will act in accordance with section 11 of this policy.

11. In the event of anaphylaxis

- 11.1. Anaphylaxis symptoms include the following:
 - Persistent cough
 - Hoarse voice
 - Difficulty swallowing, or swollen tongue
 - Difficult or noisy breathing
 - Persistent dizziness
 - Becoming pale or floppy
 - Suddenly becoming sleepy, unconscious or collapsing
- 11.2. In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor with their legs raised, and will call for help from a designated staff member.
- 11.3. The designated staff member will administer an AAI to the pupil. Spare AAIs will only be administered if appropriate consent has been received.
- 11.4. Where there is any delay in contacting designated staff members, the nearest staff member will administer the AAI.
- 11.5. The emergency services will be contacted immediately.
- 11.6. A member of staff will stay with the pupil until the emergency services arrive – the pupil will remain lay flat and still.
- 11.7. If the pupil stops breathing, a suitably trained member of staff will administer CPR.

- 11.8. If there is no improvement after five minutes, a further dose of adrenaline will be administered using another AAI, if available.
- 11.9. In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.
- 11.10. A designated staff member will contact the pupil's parents as soon as is possible.
- 11.11. Upon arrival of the emergency services, the following information will be provided:
 - Any known allergens the pupil has
 - The possible causes of the reaction, e.g. certain food
 - The time the AAI was administered – including the time of the second dose, if this was administered
- 11.12. Any used AAIs will be given to paramedics.
- 11.13. Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.
- 11.14. Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported.
- 11.15. A member of staff will accompany the pupil to hospital in the absence of their parents.
- 11.16. If a pupil is taken to hospital by car, two members of staff will accompany them.
- 11.17. Following the occurrence of an allergic reaction, the senior leadership team, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

12. Monitoring and review

- 12.1. The headteacher is responsible for reviewing this policy annually.
- 12.2. The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported immediately.
- 12.3. Following each occurrence of an allergic reaction, this policy and pupils' IHPs will be updated and amended as necessary.