



ALLERGY POLICY

Reviewed and updated autumn 2024 | Next review autumn 2025

Introduction

Allergic disease is the most common chronic condition in childhood. An allergic reaction occurs when a person's immune system is triggered by a substance that is usually considered harmless. Whilst most allergic reactions are mild, some can be very serious and can cause anaphylaxis which is a life-threatening medical emergency. Many of our pupils and staff have been diagnosed with a severe allergy, although it should be noted that an allergic reaction mild and severe can occur without previous history.

There are 14 food allergens:

- Celery – including leaves, stalks, seeds and celeriac
- Cereals – Wheat, rye, barley and oats
- Crustaceans – prawns, crabs, shrimp, scampi and lobsters
- Eggs – a common allergy in babies and young children, can be found in cakes, sauces and pastries
- Fish – tuna, cod, halibut etc. dressings and Worcestershire sauce
- Lupin – found in bread, pastries and pasta
- Milk – butter, cheese, cream and milk powders
- Molluscs – land snails, whelks, squid, mussels and oysters
- Mustard – liquid mustard, mustard powder, mustard seeds, leaves, flowers and mustard oils
- Peanuts – can be found in cakes, biscuits and sauces
- Sesame – can be found in bread, burgers, breadsticks, houmous, sesame oil and tahini
- Soybeans – found in bean curd, edamame beans, tofu and miso paste
- Sulphites – found in beer and dried fruit like raisins
- Tree nuts – Almonds, hazelnuts, walnuts, Brazil nuts, cashews, pecans, pistachios and macadamia nuts

These allergens have the potential to be life threatening if they cause an anaphylactic reaction.

Aims

The school has a duty of care to provide a safe environment for children and staff and to raise awareness regarding severe allergies. The school is a nut free school, with a view to cutting down the possibility of pupils and staff suffering an anaphylactic reaction. Contained in this policy are all measures aimed at reducing the risk to those children and adults who may suffer an anaphylactic reaction if exposed to allergens to which they are sensitive. Nuts and snacks containing nuts are not allowed in school. Nuts are not used by the catering company and are not allowed in school lunch boxes. If nuts or snacks containing nuts are bought into school, then they must be placed in a sealed bag and sent home at the end of the day. The area will be cleaned thoroughly and hands washed. Parents of potentially affected pupils will be alerted to the incident. Any incident will be recorded. Regular reminders will be communicated to parents and staff.

Management

Taking a whole school approach, this policy will be managed by:

- Foodstuffs containing all types of nuts will NOT be sent into school. This will include peanut butter, Nutella, cakes, chocolate bars, fruit and cereal bars and sesame seed snaps.
- Parents will be encouraged to read ingredient lists on packaging.
- The school caterers will produce nut free food, although traces cannot be avoided. Labelling of dishes informs pupils and staff of allergens.
- Staff supervising at lunchtime should ensure pupils wear their purple lanyards so catering staff are aware that they have allergies.
- Pupils encouraged not to share food.
- Staff training in awareness of allergies and understanding and dealing with Anaphylaxis

Management of pupils with allergies

Parents must inform the school of any allergies and provide relevant medical information and complete an Allergy Action Plan where appropriate. An Individual Health Care Plan (IHCP) will be created for pupils with a severe allergy. These will be displayed in the main staff room, school office, school kitchen, Branksomewood, staff room and prep room and staff are expected to read these. These are updated annually. Details are also held on isams.

Parents should inform the school of any changes.

It is the responsibility of parents to ensure that, if prescribed, their child holds an in-date AAI (Adrenalin Auto-Injector) for use in an emergency. This is a pre-filled injection device containing adrenaline which when injected, can help reduce the body's allergic reaction. The school holds AAI's for emergency use. The emergency AAI's can only be used by children who have been prescribed an AAI and theirs is not available or is unusable. The emergency AAI can only be used by children for whom written parental consent has been obtained.

Parents will be asked to provide a completed Allergy Action Plan. Their spare EpiPen will be kept at the school office, along with the Action Plan, in a clear box clearly labelled with the child's name and photograph.

Pupils with an allergy should not feel discriminated against or feel stigmatised. They should not be excluded from class activities or made to sit separately in the dining room. Allergy bullying by other pupils could be a result of highlighting their allergy in front of the class. Awareness and inclusivity are important amongst pupils.

Risk assessment regarding nut allergies

- Staff will not inspect all food bought into school but if they suspect food of containing nuts then they will confiscate it.
- Any food bought into school which does contain nuts will be removed and bagged.
- Promotion of this Policy
- Staff will be given training in how to identify and deal with an event caused by an allergy.
- Publication of this policy on the school website.
- Reminders in the school newsletter, website, and trip letters.

Anaphylaxis definition

Defined as an extreme allergic reaction which requires medical attention. When these allergies are diagnosed, the children are made aware from an early age what they can and cannot eat and drink. The majority of cases can go through school with no incidences. Food is often the issue, particularly allergies to nuts, fish and dairy. Wasp and bee stings can also cause an allergic reaction which can be extreme in some people. If the condition is life threatening, then medication can help treat it. This could include antihistamines, adrenaline inhaler or injector, depending on the severity of the reaction.

If a pupil is likely to suffer from a severe allergic reaction, all staff are made aware of the condition.

Symptoms of anaphylaxis

These include one or more of the following:

In mild / moderate cases look for:

- a red, itchy rash, or raised area of skin (wheals/hives) often around the face and neck
- red, itchy, watery eyes
- rapid swelling of hands, feet, or face (particularly lips and neck)
- abdominal pain, vomiting, or diarrhoea

In severe there are additional symptoms to be aware of:

Airway

- Swollen tongue
- Difficulty swallowing/ speaking
- Throat tightness
- Change in voice – hoarse or croaky sounds

Breathing

- Difficult or noisy breathing
- Chest tightness
- Persistent cough
- Wheeze- whistling noise due to constricted airway

Circulation

- Feeling dizzy or faint
- Collapse
- Babies and young children may suddenly become floppy and pale
- Loss of consciousness

Any of these symptoms can start between three and sixty minutes after exposure. Occasionally, this can be delayed and happen a few hours or days later.

Anaphylaxis can vary in severity. Symptoms will appear quicker if the reaction is severe and may even result in death.

Health plans and emergency procedures

Pupils with severe allergies will have health plans which detail what to do in an emergency. This plan will highlight triggers and medication.

- If someone's having a severe allergic reaction, help them to use an AAI it or do it yourself **STRAIGHT AWAY** following the instructions.
- Call 999 or 112 and tell ambulance control that you suspect **ANAPHYLAXIS**.
- Help them to get comfortable and monitor their breathing and level of response by lying the casualty down with their legs raised. If they are having breathing difficulties, then sit them up.
- Repeated doses of adrenaline can be given at five-minute intervals if there is no improvement or the symptoms return.