All Saints' Roman Catholic High School, A Voluntary Academy

part of Romero Catholic Academy Trust



Allergy Management Policy

Updated: Summer 2023

To be reviewed: Summer 2025

Responsibility of: School Operations Manager

in conjunction with the School Catering Manager and the School SENDCO

Policy Approval:

Signature of Headteacher

Signature of Committee Chair/Vice-Chair

Date

Date

Mission Statement

All Saints' is a school where the Catholic faith is taught, lived and celebrated.

We will educate the whole person spiritually, morally and intellectually.

We embrace Catholic values in all we do and in all our relationships.

We will identify and cater for the individual student's needs and prepare them for responsible participation in society.

Our aim is to follow Christ's teaching, as found in the Gospels, in everything we do.

This Allergy Management policy is to be used in conjunction with the school's 'Supporting Pupils in schools with medical Conditions' Policy

Statement

All Saints' RC High School is unable to guarantee a completely allergen free environment. However, we aim to minimise the risk of exposure, encourage self-responsibility and aim for an effective response to any possible emergencies

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1. Introduction

An allergy is a reaction by the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis.

Anaphylaxis is a severe systemic allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes often include foods, insect stings, or drugs.

Anaphylaxis is a severe life threatening generalised or systemic hypersensitivity reaction. This is characterised by rapidly developing life-threatening airway / breathing / circulatory problems usually associated with skin or mucosal changes.

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but not limited to):-Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how All Saints' Roman Catholic High School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2. Role and Responsibilities

Parent responsibilities

On entry to the school, it is the parent's responsibility to inform reception the School General Office/SENDCo of any allergies. This information should include all previous severe allergic reactions, history of anaphylaxis and details of all prescribed medication.

Parents are to supply a copy of their child's Allergy Action Plan to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. Schools nurse/GP/allergy specialist.

Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.

Parents are requested to keep the school up to date with any changes in allergy management.

Staff Responsibilities

All staff will complete anaphylaxis training. Training is provided for all staff on a regular basis and on an ad-hoc basis for any new members of staff.

Staff must be aware of the pupils in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

The School Office will ensure that there is an up to date Individual Health Care Plan for the pupil (incorporating an Allergy Action Plan). It is kept on the pupil's SIMs record and in the School Office.

It is the parent's responsibility to ensure all medication in in date however the School Office will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

The School Office keeps a register of pupils who have been prescribed an Adrenaline Auto-Injector (AAI) and a record of use of any AAI(s) and emergency treatment given.

Pupil Responsibilities

Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.

Pupils who are trained and confident to administer their own auto-injectors will be encouraged to take responsibility for carrying them on their person at all times.

3. Allergy Action Plans / Individual Health Care Plans

Allergy action plans are designed to function as Individual Healthcare Plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline autoinjector. These should be provided to school by the pupil's parent.

When a pupil is diagnosed with a severe allergy, or a pupil with a severe allergy joins school and an Allergy Action Plan is not available, then an Individual Health Care Plan (IHCP) will be written in conjunction with the pupil's parents. The IHCP should incorporate the same details as an Allergy Action Plan would incorporate.

4. Emergency Treatment and Management of Anaphylaxis

What to look for:

- swelling of the mouth or throat
- · difficulty swallowing or speaking
- · difficulty breathing
- sudden collapse / unconsciousness
- hives, rash anywhere on the body
- · abdominal pain, nausea, vomiting
- sudden feeling of weakness
- · strong feelings of impending doom

Anaphylaxis is likely if all of the following 3 things happen:

- sudden onset (a reaction can start within minutes) and rapid progression of symptoms
- life threatening airway and/or breathing difficulties and/or circulation problems (e.g. alteration in heart rate, sudden drop in blood pressure, feeling of weakness)
- changes to the skin e.g. flushing, urticaria (an itchy, red, swollen skin eruption showing markings like nettle rash or hives), angioedema (swelling or puffing of the deeper layers of skin and/or soft tissues, often lips, mouth, face etc.) Note: skin changes on their own are not a sign of an anaphylactic reaction, and in some cases don't occur at all. If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly.

Adrenaline is the mainstay of treatment and it starts to work within seconds. Adrenaline should be administered by an injection into the muscle (intramuscular injection)

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

Adrenaline must be administered with the minimum of delay as it is more effective in preventing an allergic reaction from progressing to anaphylaxis than in reversing it once the symptoms have become severe.

ACTION:

- Stay with the child and call for help. DO NOT MOVE CHILD OR LEAVE UNATTENDED
- Remove trigger if possible (e.g. Insect stinger)
- Lie child flat (with or without legs elevated) A sitting position may make breathing easier
- USE ADRENALINE WITHOUT DELAY and note time given. (inject at upper, outer thigh
- through clothing if necessary)
- CALL 999 and state ANAPHYLAXIS
- If no improvement after 5 minutes, administer second adrenaline auto-injector
- · If no signs of life commence CPR
- Phone parent/carer as soon as possible

ALL PUPILS MUST GO TO HOSPITAL FOR OBSERVATION AFTER ANAPHYLAXIS EVEN IF THEY APPEAR TO HAVE RECOVERED AS A REACTION CAN REOCCUR AFTER TREATMENT.

5. Supply, storage and care of medication

Supply

Pupils will be encouraged to take responsibility for and to carry their own two adrenaline injectors on them at all times (in a suitable bag/ container).

Spare medication should also be held in the General Office, not locked away and accessible to all staff. Medication should be stored in a rigid box and clearly labelled with the pupil's name and a photograph.

It is the responsibility of the child's parents to ensure that the anaphylaxis medication is up-to-date and clearly labelled, however the General Office will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Symptoms of anaphylaxis can come on very suddenly, so school staff need to be prepared to administer medication if the young person cannot.

Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes. Spare AAIs are stored in a Green, clearly labelled box in the General Office. It is clearly visible, on the wall.

Disposal

AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin.

The sharps bin is kept in the General Office.

6. 'Spare' adrenaline auto injectors in school

All Saints' RC High School has purchased spare adrenaline auto-injector (AAI) devices for emergency use in children who are risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date).

These are stored in a Green rigid box, clearly labelled 'EPIPENS' kept safely, not locked away and accessible and known to all staff.

All Saints' RC High School holds one spare pen which are kept in the General Office

The School General Office is responsible for checking the spare medication is in date on a monthly basis and to replace as needed.

Written parental permission for use of the spare AAIs is included in the pupil's AAP / IHCP.

If anaphylaxis is suspected in an undiagnosed individual call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

7. Staff Training

The School Operations Manager and School Business Support Officer (General Office) are the named staff members responsible for coordinating all staff anaphylaxis training and the upkeep of the school's anaphylaxis policy.

The School Operations Manager will conduct a practical anaphylaxis training session at the start of every new academic year.

All staff will complete online anaphylaxis awareness training at the start of every new academic year. Training is also available on an ad-hoc basis for any new members of staff.

Training includes:

- Knowing the common allergens and triggers of allergy
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
- Administering emergency treatment (including AAIs) in the event of anaphylaxis knowing how and when to administer the medication/device
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance Knowing who is responsible for what
- · Associated conditions e.g. asthma
- · Managing allergy action plans and ensuring these are up to date
- · A practical session using trainer devices

8. Inclusion and safeguarding

All Saints' RC High School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

9. Catering

All Saints' RC High School is committed to reducing the risk to pupils, staff and visitors with regard to the provision of food and the consumption of allergens in food that could lead to an allergic reaction

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

The 'Top14' Allergens are;

- CEREALS containing Gluten
- CELERY including stalks, leaves, seeds and celeriac in salads
- CRUSTACEANS for example prawns, crab, lobster, scampi, shrimp paste
- EGGS also food glazed with egg
- FISH including some salad dressings, relishes, fish sauce, some soy, Worcester sauce
- SOYA for example tofu, bean curd, soya flour
- MILK also food glazed with milk
- NUTS including almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew and macadamia nuts, nut oils, marzipan
- PEANUTS including sauces, cakes, desserts, ground nut oil, peanut flour
- MUSTARD including liquid mustard, mustard powder, mustard seed
- SESAME SEEDS for example in bread, bread sticks, tahini, hummus, sesame oil
- SULPHUR DIOXIDE/SULPHITES found in dried fruit, fruit juice drinks, wine, beer
- LUPIN including seeds and flour, in some bread and pastries
- MOLLUSES including mussels, whelks, oyster sauce, land snails and squid

The allergy to nuts is the most common high-risk allergy and, as such, demands more rigorous controls. However, it is important to ensure that all allergies and intolerances are treated equally as the effect to the individual can be both life-threatening and uncomfortable.

Foods containing nuts should not be brought in to school. It is highlighted through out school that All Saints' RC High School is a 'Nut-Free' school. Communication is regularly sent home to remind parents that items containing nuts should not be brought into school.

It is important to note that although All Saints' RC High School is a nut free school, some of our dishes MAY CONTAIN traces of the 14 allergens. Whilst our dishes may not contain a specific allergen due to the wide range of ingredients used within our kitchen, foods may be at risk of cross contamination by other ingredients. A number of items sold in the canteen may contain allergens due to their manufacturing process e.g. Chicken Burgers. Where food is provided by the school, Catering staff are instructed about measures to prevent cross contamination during the handling, preparation and serving of food.

The school menu and an allergen list for items sold are available for parents to view on the school website at www.allsaintshigh.lancs.sch.uk.

The General Office will inform the Catering Manager of pupils with food allergies. There is a system in place to ensure catering staff can identify pupils with allergies - photographs of pupils with severe allergies are displayed in the catering kitchen. The catering payment system also alerts members of catering staff of a pupil's allergies at the point of sale

The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.

Use of food in cooking classes, science experiments and special events (e.g. assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children.

10. Educational Visits

Staff leading school trips must check the requirements of all pupils they are taking off site. All pupil's information is on SIMs. Where food intolerance has been identified, this must be relayed to the School Catering Manager if they are ordering packed lunches.

They should also ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

Overnight school trips may be possible with careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (if provided by the venue).

Sporting Excursions

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation.

The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team.

Most parents are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

11. Charity Events

If the school hosts any 'bake sales', coffee mornings, BBQs for families or charity it is important that no food poses a risk to the end user, however this is difficult for the school to monitor. Where products are not made on site, but sold by the school, appropriate signage should be in place. This should state the following;

'This item was not produced at All Saints' RC High School therefore we cannot guarantee that it does not contain nuts or any other allergens.'

All products should be plated separately, and stored as such (wrapped where possible) to prevent cross contamination to other items for sale

It should be left to the discretion of the person buying the food that they accept the risk that allergens may be present

12. Allergy awareness

All Saints' RC High School supports the approach advocated by The Anaphylaxis Campaign and Allergy UK towards nut bans/nut free schools. Nuts are only one of many allergens that could affect pupils, and no school can guarantee a truly allergen free environment for a child living with food allergy.

All Saints' RC High School has adopted a culture of allergy awareness and education. A 'whole school awareness of allergies' ensures teachers, pupils and all other staff aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

13. Risk Assessment

All Saints' RC High School will conduct a detailed risk assessment to help identify any gaps in our systems and processes for keeping allergic children safe for all new joining pupils with allergies and any pupils newly diagnosed.

