



Allergy Management Policy

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1. Introduction

Purpose:

To minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.

- An allergy is a reaction of 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 serious reaction called anaphylaxis.
- Anaphylaxis is a serious, life-threatening 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 can include foods, insect stings, and drugs.
- Our understanding is that the majority of healthcare professionals classify an allergic reaction as anaphylaxis when it involves difficulty in breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).
- 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 are not limited to):- peanuts, tree nuts, sesame, milk, eggs, fish, latex, insect venom, pollen and animal dander.

This policy sets out how Fairfield Primary School will support pupils with allergies, to ensure they are safe and are not disadvantaged whilst taking part in school life.

2. Roles and responsibilities

Parent Responsibilities:

- On entry to the school, it is the parent's responsibility to inform the school office and class teacher of any allergies. The school must be informed of all serious allergic reactions that a child has experienced, if a child has a history of anaphylaxis and details of all prescribed medication.
- Parents must provide the school with a copy of their child's Allergy Action Plan ([BSACI plans](#) preferred). If a child does not have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. school nurse/GP/allergy specialist.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents must keep the school informed of any changes to a child's allergy management. The Allergy Action Plan will be updated accordingly.

Staff Responsibilities:

- All staff should complete anaphylaxis training. Training should be provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.
- Staff will be made aware of the pupils in their care (regular or cover classes) who have known allergies

by through the Evolve forms. The catering staff will also be provided with the same information which is uploaded to the Cypad system. This is needed as an allergic reaction could occur at any time and not just at mealtimes. The Big Fresh company also has an allergen policy which is on its website. 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, have the necessary medication. Where appropriate, this will be carried by staff/ older children. If a child has not been provided with the necessary medication, the school retains the right to say the child will not be able to attend the excursion, due to the potential risk.
- First aiders/Headteacher will ensure that the pupil's current Allergy Action Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date. The school will check medication kept at school on a termly basis and send a reminder to parents where they are aware that medication is approaching its expiry date.
- The school will keep a list 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 any symptoms they might expect to experience, 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 AAIs will be encouraged to take responsibility for carrying them on their person at all times.

3. Allergy Action Plans

- Allergy action plans are designed to function as individual healthcare plans for children with food allergies, providing medical and parental consent for the school to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto-injector.
- School recommends using the British Society of Allergy and Clinical Immunology ([BSACI Allergy Action Plans](#)). This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK.
- It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.
- The school must be informed of any changes to a child's allergy management.

4. Emergency Treatment and Management of Anaphylaxis

In an emergency, staff will follow the approach set out below:

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- **AIRWAY** - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- **BREATHING** - sudden onset wheezing, breathing difficulty, noisy breathing.
- **CIRCULATION** - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

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.

What does adrenaline do?

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

As soon as anaphylaxis is suspected, adrenaline must be administered without delay. Action:

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- **USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY** and note the time given. AAls should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.
- **CALL 999** and state **ANAPHYLAXIS (ana-fil-axis)**.
- If no improvement after 5 minutes, administer second AAl.

- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

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

For all children who need it, there is an individual named container which is kept safely in the Headteacher's office, which is **accessible to all staff**.

Medication will be stored, at school, in a suitable container which is clearly labelled with the pupil's name. The pupil's medication storage container should contain the following medication, which must be provided to the school by the child's guardians:

- Two AAls i.e. EpiPen® or Jext® or Emerade®
- An up-to-date allergy action plan
- Antihistamine as tablets or syrup (if included on allergy action plan)
- Spoon if required
- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is in date and clearly labelled. The School will check medication kept at school on a termly basis and send a reminder to parents where they are aware that medication is approaching its expiry date.

Parents can subscribe to expiry alerts for the relevant AAls their child is prescribed, to make sure they can get replacement devices in good time.

Older children and medication

Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on **very suddenly**, so school staff need to be prepared to administer medication if the young person cannot.

Storage

AAls should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

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

AAls are stored in a colour pack/container, clearly labelled 'Emergency Anaphylaxis Adrenaline Pen', kept

safely and is **accessible and known to all staff**.

The school office/Headteacher is responsible for checking the spare medication is in date on a monthly basis and replacing any medication where necessary.

If anaphylaxis is suspected **in an undiagnosed individual** the staff member will call the emergency services and to report suspected anaphylaxis. Advice from the emergency services will be followed, including advice as to whether administration of the spare AAI is appropriate.

6. Staff Training

The named staff members responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's Allergy management policy are:

Graeme Jones
Doctor Edwards
Leanne Convery

All staff should complete Allergy Training annually. This 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
- Managing allergy action plans and ensuring these are up to date.

A practical session using trainer devices (these can be obtained from the manufacturers' websites: www.epipen.co.uk and www.jext.co.uk and www.emerade-bausch.co.uk)

7. Inclusion and safeguarding

Fairfield Primary 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. For example, we will ensure the school is, as far as possible, inclusive in events that involve food e.g. lessons with food preparation will seek to avoid common allergens, any cake sales should be arranged so as to be inclusive and safe for those who suffer from allergies. School will discourage parents bringing in treats to 'share', as this represents a potential risk for children with allergies.

8. Catering

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

The school menu is available for parents to view in advance, on a weekly/fortnightly/monthly basis. This lists all ingredients and allergens are highlighted. It is available on the school website at <https://www.bigfreshcatering.co.uk/primary-menus/>

The school will inform the Catering Team of pupils with food allergies. It is updated as necessary, e.g. new admission, new diagnosis. If they wish, parents/carers are able to meet with the catering team to discuss specific requirements.

The school adheres to the following [Department of Health guidance](#) recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- If food is purchased from the school canteen parents should check the appropriateness of foods by speaking directly to the catering manager.
- The pupil should be taught to also check with class teacher/catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

9. School trips

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.

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 should 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 First Aid trained member of staff will accompany the team. If another school feels that they are not equipped to cater for any food-allergic child, the school will arrange for the child to take alternative/their own food.

10. Allergy awareness and nut bans

Fairfield Primary School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

A 'whole school awareness of allergies' ensures teachers, pupils and other staff are 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.

THE 14 FOOD ALLERGENS



MOLLUSCS

Including land snails, whelks and squid.



EGGS

Can be found in cakes, sauces and pastries.



FISH

Found in pizza, dressings and Worcestershire sauce.



LUPIN

Lupin can be found in bread, pastries and pasta.



SOYA

Various beans including edamame and tofu.



MILK

Butter, cheese, cream and milk powders contain milk.



PEANUTS

Can be found in cakes, biscuits and sauces.



GLUTEN

In food made with flour such as pasta and bread.



CRUSTACEANS

Such as crab, lobster, prawns, shrimp and scampi.



MUSTARD

Can be in liquid or powder form as well as seeds.



NUTS

Including cashews, almonds and hazelnuts.



SESAME

Found on burgers, bread sticks and salads.



CELERY

Including stalks, leaves, seeds and celeriac.



SULPHITES

Found in dried fruit like raisins and some drinks.

11. Risk Assessment

Fairfield Primary School will conduct an individual risk assessment for all new pupils where the school is informed that a pupil has allergies, as well as for any pupil where the school is informed that the pupil has been diagnosed as having allergies. This policy will be reviewed annually to help identify any gaps in our systems and processes for keeping allergic children safe.

12. Useful Links

- Anaphylaxis UK - <https://www.anaphylaxis.org.uk/>
- Safer Schools Programme - <https://www.anaphylaxis.org.uk/education/safer-schools-programme/>
- AllergyWise for Schools online training - <https://www.allergywise.org.uk/p/allergywise-for-schools1>
- Allergy UK - <https://www.allergyuk.org>
- Whole school allergy and awareness management - <https://www.allergyuk.org/schools/whole-school-allergy-awareness-andmanagement>
- BSACI Allergy Action Plans - <https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/>
- Spare Pens in Schools - <http://www.sparepensinschools.uk>
- Department for Education Supporting pupils at school with medical conditions - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf
- Department of Health Guidance on the use of adrenaline auto-injectors in schools - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016) <https://www.nice.org.uk/guidance/qs118>
- Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020) <https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834>

