

# **Allergy Awareness & Management Policy**

Date reviewed and approved by Governing Body: December 2021

**Review period:** Every 3 years or earlier if required by Head Teacher

Next review due: November 2024

#### **Contents**

1.	Statement of Intent:	1
2.	Aim:	2
3.	Definitions:	2
4.	Procedures for Allergy Management:	2
5.	Responsibilities for Allergy Management:	4
6.	In the event of a child suffering an allergic reaction:	5
7.	Monitoring arrangements	5
8.	Equality Review	5
9.	Links with other policies	5

## 1. Statement of Intent:

- 1.1. This policy is concerned with a whole school approach to the health care and management of those members of the school community suffering from specific allergies.
- 1.2. Little Paxton Primary School is aware that children who attend may suffer from food, bee/ wasp sting, animal or nut allergies and we believe that all allergies should be taken seriously and dealt with in a professional and appropriate way.
- 1.3. Little Paxton Primary School's position is not to guarantee a completely allergen free environment, rather: to minimise the risk of exposure, encourage self-responsibility, and plan for effective response to possible emergencies.
- 1.4. Little Paxton Primary School is committed to no food and drink sharing.
- 1.5. The Statutory Framework states that the provider must obtain information about any dietary requirements/allergy. As such parents are asked to provide details of allergies in the child's Admissions Form, which is submitted before starting school.

#### 2. Aim:

- 2.1. The intent of this policy is to minimise the risk of any child suffering allergy- induced anaphylaxis whilst at school.
- 2.2. An allergic reaction to nuts is the most common high risk allergy, and as such demands more rigorous controls throughout the policy.
- 2.3. The underlying principles of this policy include:
  - The establishment of effective risk management practices to minimise the student, staff, parent and visitor exposure to known trigger foods and insects.
  - Staff training and education to ensure effective emergency response to any allergic reaction situation.
- 2.4. This policy applies to all members of the school community:
  - School Staff
  - Parents / Guardians
  - Volunteers
  - Supply staff
  - Children

## 3. **Definitions**:

- 3.1. **Allergy** A condition in which the body has an exaggerated response to a substance (e.g. food and drug) also known as hypersensitivity.
- 3.2. **Allergen** A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.
- 3.3. **Anaphylaxis** Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially lifethreatening allergic reaction to food, stings, bites, or medicines.
- 3.4. **Epipen** Brand name for syringe style device containing the drug Adrenalin, which is ready for immediate inter-muscular administration.
- 3.5. **Minimised Risk Environment** An environment where risk management practices (e.g. Risk assessment forms) have minimised the risk of (allergen) exposure.
- 3.6. Health Care Plan- A detailed document outlining an individual student's condition treatment, and action plan for location of Epipen.

## 4. Procedures for Allergy Management:

#### 4.1. General:

- 4.1.1. The involvement of parents and staff in establishing individual Health Care Plans which are written in collaboration via a meeting if required.
- 4.1.2. The establishment and maintenance of practices for effectively communicating a child's healthcare plans to all relevant staff. This is part of the hand over at the end of the new school year.
- 4.1.3. Staff training in anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency.
- 4.1.4. Age appropriate education of the children with severe food allergies.

#### 4.2. Medical Information:

- 4.2.1. The school will seek updated information via the student update form at the commencement of each academic year.
- 4.2.2. Furthermore, any change in a child's medical condition during the year must be reported to the school.
- 4.2.3. For students with an allergic condition, the school requires parents / guardians to provide written advice from a doctor (GP), which explains the condition, defines the allergy triggers and any required medication. The Senior Administrator will ensure that a Health Care Plan is established and updated for each child with a known allergy.
- 4.2.4. Teachers and teaching assistants of those students and key staff are required to review and familiarise themselves with the medical information.
- 4.2.5. Action Plans with a recent photograph for any students with allergies will be posted in relevant rooms with parental permission.
- 4.2.6. Where students with known allergies are participating in school excursions, the risk assessments must include this information.
- 4.2.7. The wearing of a medic-alert bracelet is allowed by the School.

## 4.3. Medical Information (Epipens):

Where Epipens (Adrenalin) are required in the Health Care Plan:

- 4.3.1. Parents/ guardians are responsible for the provision and timely replacement of the Epipens.
- 4.3.2. The Epipens are located securely in relevant locations approved by the School Leader.

## 5. Responsibilities for Allergy Management:

#### 5.1. Parent's role:

- 5.1.1. Parents are responsible for providing, in writing, on-going accurate and current medical information to the school.
- 5.1.2. Parents are to send a letter confirming and detailing the nature of the allergy; including:
  - 5.1.2.1. The allergen (the substance the child is allergic to).
  - 5.1.2.2. The nature of the allergic reaction (from rash, breathing problems to anaphylactic shock).
  - 5.1.2.3. What to do in case of allergic reaction, including any medication to be used and how it is to be used.
  - 5.1.2.4. Control measures such as how the child can be prevented from getting into contact with the allergen.
  - 5.1.2.5. If a child has an allergy requiring an Epipen, or the risk assessment deems it necessary, a Health Care Plan must be completed and signed by the parents.
  - 5.1.2.6. It is the responsibility of the Parent to provide the school with up to date medication / equipment clearly labelled in a suitable container.
  - 5.1.2.7. In the case of life saving medication like Epipens the child will not be allowed to attend without it.
  - 5.1.2.8. Parents are also required to provide up to date emergency contact information.
  - 5.1.2.9. Snacks and lunches brought into school are provided by each child's parent.
  - 5.1.2.10. It is the parent's responsibility to ensure that the contents are safe for the child to consume.
  - 5.1.2.11. Parents should liaise with Staff about appropriateness of snacks and any food-related activities (e.g. cooking).

#### 5.2. Staff's role:

- 5.2.1. All staff are responsible for familiarising themselves with the policy and to adhere to health & safety regulations regarding food and drink.
- 5.2.2. If a child's Admissions Form states that they have an allergy then a Health Care Plan is needed. It must be in place before the child starts attending sessions. A risk assessment should be carried out and any actions identified to be put in place. The assessment should be stored with the child's Health Care Plan.
- 5.2.3. Upon determining that a child attending school has a severe allergy, the SENCo will set up a team meeting as soon as possible where all staff concerned attend to update knowledge and awareness of the child's needs. This will include the kitchen lead and Midday Supervisor Co-ordinator.
- 5.2.4. All staff who come into contact with the child will be made aware of what treatment/medication is required by the SENCo and where any medication is stored.

- 5.2.5. All staff are to promote hand washing before and after eating.
- 5.2.6. Staff cannot guarantee that foods will not contain traces of nuts.
- 5.2.7. All tables are cleaned with an approved solution.
- 5.2.8. Children are not permitted to share food.
- 5.2.9. As part of the staff first aid course, Epipen use and storage will be discussed.
- 5.2.10. We may ask the parent for a list of food products and food derivatives the child must not come into contact with and this will be shared with appropriate staff..
- 5.2.11. Emergency medication should be easily accessible, especially at times of high risk.
- 5.2.12. Staff should liaise with parents about snacks and any food-related activities.

## 6. In the event of a child suffering an allergic reaction:

- 6.1. We will delegate someone to contact the child's parents.
- 6.2. If a child becomes distressed or symptoms become more serious telephone 999.
- 6.3. Keep calm, make the child feel comfortable and give the child space.
- 6.4. If medication is available it will be administered as per training and in conjunction with the Managing of Medicines Policy.
- 6.5. If parents have not arrived by the time an ambulance arrives, a member of staff will accompany the child to hospital.

# 7. Monitoring arrangements

7.1. This policy will be reviewed every **3 years** and shared with the full governing board.

## 8. Equality Review

- 8.1. Under the Equality Act 2010 we have a duty not to discriminate against people on the basis of their age, disability, gender, gender identity, pregnancy or maternity, race, religion or belief and sexual orientation.
- 8.2. This policy has been equality impact assessed and we believe that it is in line with the Equality Act 2010 as it is fair, it does not prioritise or disadvantage any pupil and it helps to promote equality at this school.

## 9. Links with other policies

- 9.1. Medical Conditions in School
- 9.2. First Aid and Administering Medication in School