



Food Allergy Policy

Introduction

Schools have a legal duty to support pupils with medical conditions, including allergies. Schools must adhere to legislation and statutory guidance on caring for pupils with medical conditions, including the administration of allergy medication and adrenaline auto-injectors (AAIs).

Delph Side Community Primary School recognises that members of our community (pupils, parents, visitors and staff) may suffer from potentially life-threatening allergies or intolerances to certain foods and other allergens.

Delph Side Community Primary School is committed to a whole school approach to the care and management of those members of the school community. This policy looks at food allergy and intolerances.

A food allergy policy must be read in conjunction with the schools' Health and Safety Policy, First Aid Policy and Safe Eating Policies as the management of anaphylaxis is significant consideration in all the aforementioned.

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

The school's position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure by hazard identification, instruction and information. This will encourage self-responsibility to all those with known allergens to make informed decisions on food choices. It is also important that the school has robust plans for an effective response to possible emergencies. This policy has been created with guidance from the School Kitchen to ensure compliance under the Food Information for Consumers Regulation (1169/2011) which came into force in December 2014.

The school is committed to proactive risk food allergy management through:

- The encouragement of self-responsibility and learned avoidance strategies amongst those suffering from allergies.



- The establishment and documentation of a comprehensive management plan for menu planning, food labelling, stores and stock ordering and customer awareness of food produced on site.
- Provision of a staff awareness programme on food allergies/intolerances, possible symptoms (anaphylaxis) recognition and treatment.
- Being a 'Nut Aware' school

The intent of this policy is to minimise the risk of any person suffering allergy-induced anaphylaxis, or exacerbation of a food intolerance whilst at Delph Side or attending any school related activity. The policy sets out guidance for staff to ensure they are properly prepared to manage such emergency situations should they arise. It is also intended to outline how information regarding possible allergens can be relayed to the school kitchen and catering staff.

The common causes of allergies relevant to this policy are the 14 major food allergens (as set out by the Food Standards Agency):

- Cereals containing Gluten.
- Celery including stalks, leaves, seeds and celeriac in salads.
- Crustaceans, (prawns, crab, lobster, scampi, shrimp paste)
- Eggs - also food glazed with egg.
- Fish - some salad dressings, relishes, fish sauce, some soy and Worcester sauces.
- Soya (tofu, bean curd, soya flour)
- Milk - also food glazed with milk.
- Nuts, (almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew and macadamia (Queensland) nuts, nut oils, marzipan)
- Peanuts - sauces, cakes, desserts, ground nut oil, peanut flour
- Mustard - liquid mustard, mustard powder, mustard seeds
- Sesame Seeds - bread, bread sticks, tahini, houmous, sesame oil
- Sulphur dioxide/Sulphites (dried fruit, fruit juice drinks, wine, beer)
- Lupin, seeds and flour, in some bread and pastries
- Molluscs, (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 at least uncomfortable and at worst life threatening, if suffered.



Definitions

Allergy	A condition in which the body has an exaggerated response to a substance (e.g. food or drug), also known as hypersensitivity.
Allergen	A normally harmless substance, that triggers an allergic reaction in the immune system of a susceptible person.
Anaphylaxis	or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to a trigger (food, stings, bites, or medicines).
AAI	Is an Adrenaline autoinjector (AAI) which is a syringe like device containing the drug adrenaline. This is an individually prescribed drug for known sufferers which is ready for immediate intramuscular administration. This may also be referred to as an Epi-Pen/ Ana pen or Jext pen (brand names).

General Aspects (pupils)

The school will establish clear procedures and responsibilities to be followed by staff in meeting the needs of pupils with additional medical needs. This process includes:

- The Medical Needs Lead will, in collaboration with the parents and the child, obtain the child's allergy action plan or develop an individual medical care plan as required.
- The Medical Needs Lead will communicate effectively and supply individual medical care plans to all relevant staff and departments. Copies of which will be stored on the school One Drive.
- Staff will access mandatory first aid training including anaphylaxis management. (Training provided by Kitt Anaphylaxis)
- First aid procedures will be followed in the event of an emergency.
- Posters with affected pupil's pictures, names and year group are displayed throughout the school in the classrooms, kitchen and first aid storage facility (with consent from parent/carer).



Responsibilities

Schools Responsibilities

Medical information for pupils is private and confidential. However, it is the responsibility of administration staff and the medical needs lead to pass any information on to the catering manager with regards to food allergies of pupils.

Staff will be made aware of the effected pupils via:

- Admin staff will update school systems such as Cypad (the catering application that kitchen staff use to ensure that those children with allergies and intolerances are not offered food choices that include allergens).
- Staff training and instruction in the catering department. Kitchen staff can identify all allergens within the items on their menu, they can also identify those children with allergies by our allergy/intolerance/choking risk lanyard system. Children who are affected wear lanyards identifying their allergens and risk factors in the dining hall.
- A list will be sent out to all staff at the start of the academic year outlining pupils with medical conditions and allergies. This list can be found at the front of every classroom medical file and can be accessed on the One Drive. This medical needs and allergy register is updated throughout the year when parents notify school of any changes to medical conditions and diagnosed allergies/ intolerances.
- Medical information including allergy status will be on SIMs for staff to download during trips and activities.
- Staff will access Anaphylaxis Training via the KITT Portal as part of the package purchased by school which includes emergency Jext Pens for administration as required in an emergency. Additional devices are located in The Hatch in the KITT anaphylaxis kit (the key for which is in a smash pad next to the kit, in case of emergencies) There are also spare keys in reception and in the first aid cupboard located in the main corridor opposite the year 3 classroom.
- It is the responsibility of the Medical Needs Lead to keep the Anaphylaxis kit up to date by checking expiry dates and liaising with the kit provider.
- Teachers and support staff are responsible for ensuring that they always have their pupil's medication with them.



Staff Responsibilities

- All staff will complete anaphylaxis training. Training is provided for all staff on a yearly 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.
- Medical Needs Lead will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date however the Teacher / Medical Needs Lead will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- Medical needs Lead 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.

Parents Responsibilities

- On entry to the school, it is the parent's responsibility to inform reception staff of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) 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. 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 auto injector. Delph Side



Primary School recommends using the British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans to ensure continuity. This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK

- 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. The Allergy Action Plan will be kept updated accordingly.

The Catering Staff are also responsible for:

- Using only authorised suppliers and being the controlling point and contact for all purchases of food stuffs for school catering.
- Ensuring suppliers of all foods and catering suppliers are aware of the School's Food Allergy policy and the requirements under the labelling law.
- Ensuring suppliers of food stuffs are nut free or labelled 'may contain nuts.'
- Being aware of pupils and staff who have such food allergies and updating this training every three years. All staff must be informed of this during their in-house induction training.
- Clear labelling of items of food stuffs that may contain nuts.

Packed Lunch Requirements

Since this condition can be life threatening, we are asking all members of the school community for their help in minimising the risk to these children by:

- Not giving children nuts or nut products in their packed lunches.
- Not giving nuts or nut products or snacks/bars containing nuts for break time snacks
- Not supplying the school with cakes or food items containing nuts for birthday celebrations, sales, or events
- Not sending containers such as cereal boxes for DT / Art lessons into school which may have contained produce made with nuts.

We do acknowledge in our allergy policy that many foods are labelled as '*may have been produced in a factory handling nuts and cannot be guaranteed to be nut free*'. Such items **will** be allowed in school as it would be unreasonable to expect these to be kept out of school.



- Please note where a member of staff notices a pupil eating a nut product, the product will be removed politely, and the member of staff will explain why this must be done.
- A phone call will then be made to the parent to explain what has happened, so they are fully informed and to remind them of the Allergy policy.
- Due to the severity of the problem, it is important that all parents understand and carry out the suggested measures and reduce the risk of allergic reaction to these children.

Inclusion and safeguarding

Delph Side Community 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.

Educational Visits and In-House Events

All academic staff must check the requirements of all pupils they are taking off site. This is part of the offsite risk assessment. Where food intolerance has been identified, this must be relayed to the school kitchen if they are ordering packed lunches or any foods for in-house events from our catering suppliers.

At least one staff member undertaking an offsite trip must have attended the school's medication and anaphylaxis training. This is part of the risk assessment.

Staff must also:

- Physically check that pupils have their medication before leaving site.
- Ensure that all food collected from the Catering Department is served open and has been clearly labelled, checked against the allergen matrices and the child's specific allergies, if any. The allergens need to be checked when serving/distributing the food to the child simply asking if they have any allergies or intolerances when serving the item. This also needs to be done if the child purchases any food while on a school event.

The school kitchen does not have any control over the food brought in during this time, so it is hard to monitor.

If an item of food is used for a school event that may contain nuts, a sign will be put directly in front of the food to make both staff and children aware.



Any parent whose child has an allergy to nuts will be informed before the event to ensure the parent is happy for them to be at school during this time.

If your child brings in food products to celebrate their birthday with their classmates, they should:

- Not contain nuts and where possible products that read 'may contain nuts' are not sent in.
- Send it in with the original packaging so that the labelling of allergens is clear enough for a member of staff to read and assess.
- Be aware that food may be sent back home with your child if they pose any risk to the children in the school (not necessarily in their class only)

Parents of children who have an allergy will be contacted to make sure that they agree to their child being given food items, provided from outside of the school, if they are free of their child's particular allergen(s). Once permission has been given this will assume the risk that anything produced elsewhere cannot be 100% guaranteed by the school as allergen free or not cross contaminated with allergens.

Charity Events

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

'This item was not produced at Delph Side Primary School therefore we cannot guarantee that it does not contain nuts or any other allergen'.

External companies supplying food for clubs should have allergy aware and food safety trained staff preparing and serving the food and there should be allergen matrices in place for the food served.

A check will be made by staff on specific dietary information available for the children with allergies and intolerances participating to ensure that checks can be made prior to serving.

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.



Supply, storage and care of medication

For Primary aged children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept safely, not locked away and accessible to all staff.

Medication should be stored in a suitable container and clearly labelled with the pupil's name.

The pupil's medication storage container should contain:

- Two AAIs 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 up-to-date and clearly labelled, however the Medical Needs lead will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

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

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. 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. Sharps bins to be obtained from and disposed of by a clinical waste contractor/specialist collection service/local authority (delete as appropriate).

Emergency Treatment and Management of Anaphylaxis

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 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. AAs 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 AAI.
- 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.



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>

- Resources for managing allergies at school - <https://www.allergyuk.org/living-with-an-allergy/at-school/>

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