Castlethorpe First School – Newton Blossomville CE School – North Crawley CE School
Sherington CE School – Stoke Goldington CE School

The Village Schools Federation aspires to nurture and inspire every child to experience life in all its fullness. Our schools are rooted in inclusive Christian values to enable all to flourish by building knowledge, confidence and resilience for the future. We strive to be the best we can be.
"Whatever we do, we work at it with all our heart"
Colossians 3:23

Pupil allergy policy

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1. Aims

This policy aims to:

- Set out our school's approach to allergy management, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion
- Promote and maintain allergy awareness among the school community

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on allergies in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

The Food Information Regulations 2014

The Food Information (Amendment) (England) Regulations 2019

3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

3.1 Allergy lead

The nominated allergy lead is The School Lead Teacher.

They're responsible for:

- Promoting and maintaining allergy awareness across our school community
- Recording and collating allergy and special dietary information for all relevant pupils (although the allergy lead has ultimate responsibility, the information collection itself may be delegated to the administrative staff)

Working with the School Administrator, they will ensure:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy training
- All staff are aware of the school's policy and procedures regarding allergies
- Relevant staff are aware of what activities need an allergy risk assessment
- Keeping and checking stock and expiry dates of the school's adrenaline auto-injectors (AAIs) (this may be delegated to a member of staff identified on the roles and responsibilities document)

3.2 SENCo

The SENCo is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures

- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Completing appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of pupils with allergies

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy policy
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Completing a 'request to administer medicine' for any prescription medicines, including those for allergies
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit or avoid the number of allergens included
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Understanding how and when to use their adrenaline auto-injector if they are able to
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers

4. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Any lessons that involve any food handling or tasting
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences, reading with a dog or baking
- A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog

5. Managing risk

5.1 Hygiene procedures

- Pupils are required to wash their hands before and after eating
- Sharing of food is not allowed
- Pupils have their own named water bottles

5.2 Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

All staff receive appropriate training and can identify pupils with allergies.

School menus are available for parents/carers to view with ingredients clearly labelled via the Apetitio portal.

Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils.

Food service staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated.

We ask that any birthday or celebration foods to share with peers are offered outside of school with parental permission.

5.4 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

In the event of insect bite or sting the pupil would be seen by a qualified first aider.

5.5 Animals

- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact
- Pupils with animal allergies will be risk assessed before any trips or visitors with animals take place

5.6 Support for mental health

Pupils with allergies will have additional support available through:

- Pastoral care
- Regular check-ins with their class teacher

5.7 Events and school trips

For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part.

The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training.

Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAIs

The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)
- Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil A photograph of each pupil to allow a visual check to be made

The register is kept in the class register, the emergency grab bag, the kitchen and on the front of the first aid cupboard. All of these can be checked quickly by any member of staff as part of initiating an emergency response.

6.2 Allergic reaction procedures

As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately.

Staff are trained in the administration of AAIs to minimise delays in pupil's receiving adrenaline in an emergency.

If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan.

If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one.

If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures **(see appendix one).**

A school AAI device will be used instead of the pupil's own AAI device if:

- Medical authorisation and written parental consent have been provided, or
- The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance.

If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed.

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAIs

The allergy lead is supported by the school administrator for ordering ~~buying~~ AAIs and ensuring they are stored according to the guidance.

- AAIs will be sourced from a school supplier (or local pharmacy if needed urgently)
- Two AAIs to be available at all times
- Required dosage is 150mcg per AAI

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead, supported by the school administrator, will make sure all AAIs are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times
- **Not** located more than 5 minutes away from where they may be needed
- Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.

7.3 Maintenance (of spare AAIs)

The allergy lead, supported by the school administrator, are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near

7.4 Disposal

AAIs can only be used once. Once a AAI has been used, it will be handed to the ambulance staff for safe disposal, or taken to the local pharmacy safely.

7.5 Use of AAIs off school premises

Pupils at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on school trips and off-site events

8. Training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies
- Training will be carried out annually as directed

9. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- First aid policy
- Children's sickness and absence policy

Appendix 1 – emergency procedure

Suspected anaphylaxis - procedure

<table>
<tr><td colspan="2">CALL FOR HELP FROM ANOTHER STAFF MEMBER
TELL SOMEONE TO BRING THE CHILD'S CARE PLAN & PRESCRIBED AAI (IF THEY HAVE ONE)
TELL SOMEONE TO GET THE SPARE AAI BOX (IF NO PRESCRIBED AAI)</td></tr>
<tr><td>RECOGNISE THE SIGNS OF ANAPHYLAXIS

A Airway
• Persistent cough
• Vocal changes (hoarse voice)
• Difficulty swallowing
• Swelling in throat, tongue or upper airway

B Breathing
• Difficult or noisy breathing
• Wheezing

C Consciousness/Circulation
• Feeling lightheaded or faint
• Clammy skin
• Confusion, sudden sleepiness
• Unresponsive/ unconscious (due to a drop in blood pressure)

Lay them flat and raise their legs
DO NOT allow them to stand or walk
DO NOT leave them alone

IF IN DOUBT, TREAT AS ANAPHYLAXIS

These severe symptoms may occur alongside milder stomach or skin symptoms.
Anaphylaxis may occur without any skin symptoms.</td><td>A If unconscious, place them in the recovery position

B If breathing is difficult, allow them to sit up

Administer an adrenaline auto-injector (AAI) without delay
(follow instructions on side of device)

Phone 999 and tell them the person is suffering from anaphylaxis (anna-fill-ax-is)

If there is no improvement of symptoms after 5 minutes, a second dose of adrenaline can be given – ADMINISTER THE SECOND AAI

If they stop breathing start CPR

Medical observation in hospital is recommended after anaphylaxis

Staff member to accompany child to hospital in ambulance – take their care plan with you

Hand the used AAI's to the ambulance crew

Parents/Carers to be contacted as soon as practically possible</td></tr>
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