RIVERMEAD INCLUSIVE TRUST

inspiring the journey for independence together

Allergen and Anaphylaxis Policy

Reviewed three yearly

Non-Statutory

Signed (Chair of the Trust)

Date: March 2025

Review Due: March 2028

Contents

1. Statement of Intent

The Rivermead Inclusive Trust and its associated provisions strive to ensure the safety and wellbeing of all members of the various school communities. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimizing the risk of anaphylaxis occurring whilst in one of our Trust provisions.

In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the provision in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The Trust does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

2. Legal Framework

This policy has due regard to legislation and government guidance including, but not limited to, the following:

- The Children and Families Act 2014
- The Human Medicines (Amendment) Regulations 2017
- Department of Health (2017) 'Guidance on the use of adrenaline auto- injectors in schools'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2019) 'Allergy guidance for schools'

This policy will be implemented in conjunction with the following Trust / school policies and documents:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- Educational Visits and School Trips Policy
- Anaphylaxis Risk Assessment
- Register of AAIs and AAI Record

3. Definitions

For the purpose of this policy:

- **Allergy** – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.
- **Allergen** – is a normally harmless substance that triggers an allergic reaction for a susceptible person.
- **Allergic reaction** – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:

- Hives
- Generalised flushing of the skin
- Itching and tingling of the skin
- Tingling in and around the mouth
- Burning sensation in the mouth
- Swelling of the throat, mouth or face
- Feeling wheezy
- Abdominal pain
- Rising anxiety
- Nausea and vomiting
- Alterations in heart rate
- Feeling of weakness

- **Anaphylaxis** – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:

- Difficulty breathing
- Feeling faint
- Reduced level of consciousness
- Lips turning blue
- Collapsing
- Becoming unresponsive

4. Roles and Responsibilities

The **governing board of each school** is responsible for:

- Ensuring that arrangements are in place to support pupils with allergies and who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities.
- Ensuring that policies, plans, systems and procedures are implemented to minimise the risks of pupils suffering allergic reactions or anaphylaxis at school.
- Ensuring that the school's approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual pupil.
- Ensuring that the school's arrangements give parents and pupils confidence in the school's ability to minimise susceptible pupils' contact with allergens, and to effectively support pupils should an allergic reaction or anaphylaxis occur.
- Ensuring that staff are properly trained to provide the support that pupils need, and that they receive allergy and anaphylaxis training at least annually.
- Monitoring the effectiveness of this policy and reviewing it on an annual basis, and after any incident where a pupil experiences an allergic reaction.

The **Headteacher / Head of School** is responsible for:

- The development, implementation and monitoring of the Allergen and Anaphylaxis Policy.
- Ensuring that parents are informed of their responsibilities in relation to their child's allergies.
- Ensuring that all school trips are planned in accordance with the Educational Visits and School Trips Policy, taking into account any potential risks the activities involved pose to pupils with known allergies.
- Ensuring that the whole school food protocols are effectively implemented, including those in relation to labelling foods that may contain common allergens, e.g. nuts.
- Ensuring that all relevant risk assessments, e.g. to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- Ensuring that all designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
- Ensuring that catering staff are aware of, and act in accordance with the school's policies regarding food and hygiene, including this policy.
- Ensuring that catering staff are aware of any pupils' allergies which may affect the school meals provided.
- Ensuring that Health Care Plans are written for children that require them.

Staff Trained First Aiders – each provision has an identified lead first aider

- Ensuring that there are effective processes in place for medical information to be

regularly updated and disseminated to relevant staff members, including supply and temporary staff.

- Seeking up-to-date medical information about each pupil via a medical form sent to parents on an annual basis, including information regarding any allergies.
- Contacting parents for required medical documentation regarding a child's allergy.
- Ensuring that the necessary staff members are informed about pupils' allergies.
- Understanding the action to take and processes to follow in the event of a pupil going into anaphylactic shock and ensuring that this information is passed onto staff members.

All staff members are responsible for:

- Acting in accordance with the school's policies and procedures at all times.
- Notifying school of **own** allergens and treatment
- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual healthcare plans as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Promoting hand washing before and after eating.
- Monitoring all food supplied to pupils by both the school and parents, including snacks, ensuring food containing known allergens is not provided.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen
- Ensuring that any necessary medication are out of the reach of pupils but still easily accessible to staff members.
- Liaising with the first aiders and pupils' parents to ensure the necessary control measures are in place.

Kitchen staff are responsible for:

- Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with section 4 of this policy, and the processes for identifying pupils with specific dietary requirements.
- Ensuring they are fully aware of whether each item of food served contains any of the main 14 allergens, as is a legal obligation, and making sure this information is readily available for those who may need it.

All parents are responsible for:

- Notifying the school of the following information:

— Their child's allergens
— The nature of the allergic reaction
— What medication to administer
— Specified control measures and what can be done to prevent the occurrence of an allergic reaction

- Keeping the school up-to-date with their child's medical information.
- Providing the school with up-to-date emergency contact information.
- Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Providing the school with any necessary medication, in line with the procedures outlined in the Supporting Pupils with Medical Conditions Policy.
- Communicating to the school any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen.
- Providing the school, in writing, any details regarding the child's allergies.
- Working alongside the school to develop an IHP to accommodate the child's needs, as well as undertaking the necessary risk assessments
- Signing their child's IHP, where required
- Acting in accordance with any allergy-related requests made by the school, such as not providing nut-containing items in their child's packed lunch.
- Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
- Providing a supply of 'safe' snacks for any individual attending school
- events.
- Raising any concerns they may have about the management of their child's allergies with the school.
- Ensuring that any food their child brings to school is safe for them to consume.
- Liaising with staff members, including those running afterschool clubs, regarding the appropriateness of any food or drink provided.

All pupils are responsible for:

- Ensuring that they do not exchange food with other pupils.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Being proactive in the care and management of their allergies.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- Learning to recognise personal symptoms of an allergic reaction.
- Keeping necessary medications in an agreed location which members of staff are aware of.
- Developing greater independence in keeping themselves safe from allergens.
- Notifying a staff member if they are being bullied or harassed as a result of their allergies.

5. Food Allergies

Background

True food allergies are reproducible adverse reactions to a particular food that

involve the immune system. Virtually all known food allergens are proteins. They can be present in the food in large amounts and often survive food-processing conditions.

Allergic reactions are characterised by the rapid release of chemicals in the body that cause symptoms, which can occur within minutes or up to an hour or more after ingestion of the allergen. Whilst almost any food protein can cause an allergic reaction in some people, the most common food allergens in Europe include:

The 14 allergens are:
1. Celery and celeriac
2. Cereals containing gluten – wheat, rye, barley, oats, spelt or kamut
3. Crustaceans (e.g. prawns, lobster, scampi, crab, shrimp paste)
4. Egg
5. Fish
6. Lupin (seeds and flour used in Europe for pastries and breads)
7. Milk
8. Molluscs - mussels, whelks, squid, land snails, oyster sauce
9. Mustard
10. Nuts and nut oil
11. Peanuts
12. Sesame
13. Soya
14. Sulphur dioxide and sulphites

Many allergens are hidden where you would least expect them to be. We ensure that our staff are familiar with the constituents of every ingredient (e.g. Worcester sauce usually contains anchovies (fish), many gravy mixes contain milk, celery and gluten). Our staff examine the ingredients list on the packaging carefully and check with the supplier if necessary when using different food for teaching purposes.

The proportion of the population with true food allergy is approximately 1-2% of adults and about 5-8% of children, which equates to about 1.5 million people in the UK.

N.B. Coeliac disease is not an allergy. Whilst it is classified as food intolerance it is not like other intolerances in that it is an autoimmune disease, which means that the body produces antibodies that attack its own tissues. In coeliac disease this attack is triggered by gluten, a protein found in wheat, rye and barley. This intolerance to gluten causes an inflammatory response that damages the gut. Villi (tiny, finger-like projections that line the gut) become inflamed and then flattened (villous atrophy), leading to a decreased surface area for absorption of nutrients from food. People with undiagnosed coeliac disease can, as a result, have a wide range of digestive symptoms and can suffer from nutritional deficiencies.

Operational Elements

Parents will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service. Health Care Plans will be written where necessary.

When making changes to menus or substituting food products, the school will ensure that pupils' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible. Where meals include allergens or traces of allergens, kitchen staff will use clear and fully visible labels to denote the allergens of which consumers should be aware.

The school will ensure that all food is labelled accurately, that food is never labelled as being 'free from' an ingredient unless staff are completely certain that there are no traces of that ingredient in the product, and that all labelling is checked before service.

The school will ensure that there are always dairy- and gluten-free options available for pupils with allergies and intolerances.

Where a pupil who attends the school has a serious nut allergy, the school will follow the processes outlined below:

- Requesting that the school catering service eliminates nuts, and food items with nuts as ingredients, from meals as far as possible
- Ensuring that food items containing nuts will not be served at, or be brought onto, school premises.

To ensure that catering staff can appropriately identify pupils with dietary needs, a photo board will be displayed on the wall in the serving area so that it is visible to all kitchen staff.

All food tables will be disinfected before and after being used. Anti-bacterial wipes and cleaning fluid will be used.

Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.
Any sponges or cloths that are used for cleaning will be colour-coded according to the areas that they are used to clean, e.g. a red sponge for an area which has been used for raw meat, to prevent cross-contamination.

There will be a set of kitchen utensils that are only for use with the food and drink of the pupils at risk.

There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products.

Food items containing bread and wheat will be stored separately.

The chosen catering service of the school is responsible for ensuring that the school's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.

The school will emphasise the avoidance of nuts and nut related products to the catering service, recognising the potentially severe allergic reaction for some people.

Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

6. Animal Allergies

Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

In the event of an animal on the school site, staff members will be made aware of any pupils to whom this may pose a risk and will be responsible for ensuring that the pupil does not come into contact with the specified allergen
.
The school will ensure that any pupil or staff member who comes into contact with the animal washes their hands thoroughly to minimise the risk of the allergen spreading.

A supply of antihistamine tablets will be kept in the first aid office in case of an allergic reaction.

7. Seasonal Allergies

- The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites. Precautions regarding the prevention of seasonal allergies include ensuring that grass within the school premises is not mown whilst pupils are outside.
- Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.
- Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.
- Pupils will be encouraged to wash their hands after playing outside.
- Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.
- Staff members will be diligent in the management of wasp, bee and ant nests on

schoolgrounds and in the school's nearby proximity, reporting any concerns to the site team and or Trust Facilities manager.

- The site team / facilities manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.
- Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

8. Adrenaline Auto-Injectors (AAIs)

Pupils and staff who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

For pupils who have been prescribed AAI devices, these will be stored in a suitably safe and central location e.g school reception, first aid room or classroom cupboard out of reach and inaccessible to pupils. The AAI will be clearly labelled with the pupil's name.

Staff should carry their prescribed AAI with them and ensure that school first aiders are aware.

In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.
The named First Aider will conduct a termly check of the pupil's anaphylaxis kit(s) to ensure that:

- AAI devices are present and have not expired.
- Replacement AAIs are obtained by parents when expiry dates are approaching.

A sharps bin is utilised where used or expired AAIs are disposed of on the school premises.

Where any AAIs are used, the following information will be recorded on the AAI Record:

- Where and when the reaction took place
- How much medication was given and by whom

9. Medical Attention and Support

Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents, the First aider and any other relevant staff members, in which the pupil's allergies will be discussed and a plan of appropriate action/support will be developed.

All medical attention, including that in relation to administering medication, will be conducted in accordance with the Administering Medication Policy and the Supporting Pupils with Medical Conditions Policy.

Parents will provide the school with any necessary medication, ensuring that this is clearly

labelled with the pupil's name, class, expiration date and instructions for administering it. Pupils will not be able to attend school or educational visits without any life-saving medication that they may have, such as AAIs.

All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.

Any specified support which the pupil may require is outlined in their IHP.

All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's IHP.

10. Staff Training

Appropriate staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so.

Staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The school will arrange specialist training where a pupil in the school has been diagnosed as being at risk of anaphylaxis.

Designated staff members (First Aiders) will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAIs according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.

All staff members will:

- Be trained to recognise the range of signs and symptoms of an allergic reaction.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild-moderate symptoms.
- Understand that AAIs should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a pupil is on the Register of AAIs.
- Understand how to access AAIs.
- Understand who the designated members of staff are, and how to access their help.
- Understand that it may be necessary for staff members other than designated staff members to administer AAIs, e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation.
- Be aware of how to administer an AAI should it be necessary.

- Be aware of the provisions of this Allergen and Anaphylaxis Policy.

11. Mild – Moderate Allergic Reaction

Mild-moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

If any of the above symptoms occur in a pupil or staff member, the nearest adult will stay with the and call for help from the designated staff members able to administer AAIs. The prescribed AAI will be administered by the designated staff member.

Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI.

A copy of the Register of AAIs will be held in the First Aid Room and at Reception for easy access in the event of an allergic reaction.

If necessary, other staff members may assist the designated staff members with administering AAIs.

The pupil's parents/carers will be contacted immediately if a pupil suffers a mild-moderate allergic reaction, and if an AAI has been administered.

In the event that a pupil or staff member without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice.

12. In the event of Anaphylaxis

Anaphylaxis symptoms include the following:

- Persistent cough
- Hoarse voice
- Difficulty swallowing, or swollen tongue
- Difficult or noisy breathing
- Persistent dizziness
- Becoming pale or floppy
- Suddenly becoming sleepy, unconscious or collapsing

In the event of anaphylaxis, the nearest adult will lay the pupil or staff member flat on the floor with their legs raised, and will call for help from a designated staff member.

The designated staff member will administer a prescribed AAI.

Where there is any delay in contacting designated staff members, the nearest staff member will administer the AAI. If necessary, other staff members may assist the designated staff members with administering AAIs

The emergency services will be contacted immediately.

A member of staff will stay with the pupil/staff member until the emergency services arrive – they will remain lay flat and still.

The headteacher / Head of School will be contacted immediately, as well as a suitably trained individual, such as a first aider.

If the pupil/staff member stops breathing, a suitably trained member of staff will administer CPR.

If there is no improvement after five minutes, a further dose of adrenaline will be administered using another AAI, if available.

In the event that a pupil/member of staff without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services immediately.

A designated staff member will contact the pupil's parents/carers as soon as is possible.

Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the pupil has
- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

Any used AAIs will be given to paramedics.

Staff members will ensure that the pupil/staff member is given plenty of space, moving other pupils and adults to a different room where necessary.

Staff members will remain calm, ensuring that the person feels comfortable and is appropriately supported.

A member of staff will accompany a pupil to hospital in the absence of their parents/carers. If a pupil is taken to hospital by car, two members of staff will accompany them.

13. Monitoring and review

Following the occurrence of an allergic reaction, the senior leadership team, will review

the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.
The Senior Leadership Team of each school is responsible for reviewing this policy annually and providing any suggestions to the Trust Executive team in order to take to the Trustee board every three years.

The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher / Head of Provision immediately.

Following each occurrence of an allergic reaction, this policy and pupils' IHPs will be updated and amended as necessary