



ALLERGY AND ANAPHYLAXIS MANAGEMENT POLICY

POLICY STATEMENT

Scope

SHSK recognises that students, parents, visitors and staff may suffer from potentially life-threatening allergies or intolerances. SHSK believes that the safety and wellbeing of those members of the school community suffering from specific allergies and who are at risk of anaphylaxis is the responsibility of the whole school community. The School position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure through: hazard identification, instruction, information, encourage self-responsibility, and plan for an effective response to possible emergencies. The School recognises that nuts are one of the most common allergens and are likely to cause the most severe reaction, therefore we do not cook with or serve products containing nuts, nor is it permissible for students to bring products containing nuts into school.

SHSK is committed to:

- Providing, as far as practicable, a safe and healthy environment in which people at risk of allergies and anaphylaxis can participate equally in all aspects of the school programme
- The encouragement of self-responsibility and learned avoidance strategies amongst students suffering from allergies.
- Raising awareness about allergies and anaphylaxis amongst the school community.
- Ensuring each staff member has adequate knowledge of allergies, anaphylaxis and emergency procedures.
- Close liaison with parents/guardians of students who suffer allergies, to assess risks, develop risk minimisation strategies, and management strategies for their student.
- Facilitating communication to ensure the safety and wellbeing of the person with an allergy who is at risk of anaphylaxis.
- Menu planning, food labelling, stores and stock ordering and customer awareness of food produced on site to reduce potential exposure.

Purpose

The aim of the policy is to:

- Minimise the risk of an allergic/anaphylactic reaction while the person is involved in school related activities.
- Ensure that staff members respond appropriately to an allergic/anaphylactic reaction by initiating appropriate treatment, including competently administering an Adrenaline Auto Injection (AAI) device.

- Raise, within the SHSK community the awareness of allergy/anaphylaxis and its management through education and policy implementation.

BACKGROUND

Any allergic reaction, including anaphylaxis occurs because the body's immune system reacts inappropriately in response to a substance that it perceives as a threat.

Anaphylaxis is a severe and potentially life-threatening allergic reaction at the extreme end of the allergic spectrum. It can occur within minutes of exposure to the allergen or the reaction may develop over hours. It can be life threatening if not treated quickly with adrenaline.

ALLERGEN AWARENESS/AVOIDANCE

The School will promote food allergy information (including anaphylaxis) through, Food and Nutrition lessons, particularly in classes where a student has a severe allergy to food products.

Catering will ensure that they provide accurate allergy information and do not use nuts or peanuts in the food (note that this does not curtail the use of ingredients which are labelled 'may contain traces of nuts and or peanuts')

The School will start to work towards the implementation of 'Natasha's Law' and will label all pre-packaged food from September 2021.

While the aim is to significantly diminish the risk of accidental exposure to known food and other allergens it can never be completely removed.

RESPONSIBILITIES

Parents are responsible for:

- Ensuring that their child does not bring anything into school which contains nuts.
- Providing ongoing, accurate and current medical information in writing to the School. Whilst the school will play a role in reminding parents when information requires updating, this responsibility lies wholly with the parents.
- Completion of the Individual Healthcare Plan (see Appendix C for example Care Plans relating to two types of AAI). N.B. Those who have not been prescribed an AAI will be required to complete the BSACI form for non-AAI users.
- Providing the School with updated information via a Student's Individual Health Care Plan at the commencement of each calendar year. Should a student develop a condition during a year or have a change in condition the parents must advise the School of the fact, with details to be clarified in the Student Health Care Plan.
- Ideally, this should include written advice from a doctor, which explains the student's allergy, defines the allergy triggers and reaction, and any required medication, including completion of an action plan with supporting photographic or other evidence.

- Supplying AAls and medication at the start of the school term or as soon as an allergy is diagnosed if during the school year.
- Ensuring medication is replaced as necessary i.e. on change of dose or use by date.
- Ensuring all medication has the original pharmacy label attached stating the student's name, date of birth and dose.
- Highlighting any classes/topics or activities which in the parent's view may need to be avoided or flagged up as 'high risk' e.g food preparation in Food and Nutrition or use of certain materials (e.g latex) in science lessons.
- Providing appropriate foods to be consumed by the student if necessary.
- Ensuring an appropriate medical pack is with the student prior to embarking on a school trip

Parents should also teach their daughter with allergies to:

- Understand what they are allergic to and look for displayed allergen labels at lunch or ask staff if they are unsure; in the case of pre-packed food, read the ingredients list
- Recognise the initial symptoms of a food allergic/anaphylactic reaction.
- Communicate with school staff as soon as she feels a reaction is starting.
- Carry her own AAI and any other medication required to deal with their allergy.
- Not share snacks, lunches, drinks or utensils.
- Understand the importance of hand washing before and after eating.
- Report to the Health Centre or Trip Organiser promptly when she feels an allergic/anaphylactic reaction is beginning.

The parents and the student's medical adviser are responsible for teaching the student to manage their allergy in the school setting.

The School's Health Centre is responsible for:

- Contacting parents for required medical documentation regarding a student's allergy and informing the Director of Students where important information is lacking. (The responsibility lies with parents to ensure this information is provided). Should information not be forthcoming, the Health Centre will carry out a risk assessment which considers the students ability to participate in lessons, visits, trips and/or events.
- Ensuring that parents are reminded of their responsibilities to provide a current Allergy Action Plan and appropriate medication.
- Ensuring that there is an effective system to regularly update and disseminate medical information to staff and others as appropriate regarding individual students.
- Photographs of students are displayed in the staff room for identification purposes and all staff must ensure that they check the board regularly for any additions/changes.
- Ensuring that where students with known allergies are participating in trips, visits and events, the risk assessment and safety management plans for these trips, visits and events include the Student's Individual Healthcare Plan.
- Ensuring that staff are trained in the use of AAls and the management of anaphylaxis and that similar training/information is provided periodically to all other staff.

Teachers are responsible for:

- Acquiring knowledge of the signs and symptoms of severe allergic reaction.
- Being familiar with information provided in the Student Individual Healthcare Plans, be aware of and implement the emergency plan if a reaction is suspected.
- Participating in nurse led training about students with life-threatening allergies including demonstration on how to use the AAI.
- Follow Allergy Action Plan (see appendices) when allergy related symptoms occur.

Catering Staff are responsible for:

- Ensuring suppliers of all foods and catering are aware of the school minimisation policy.
- Ensuring supplies of food stuffs are nut free or labelled “may contain nuts” as far as possible.
- Being aware of students and staff who have severe food allergies.
- Ensure allergen information is provided for all 14 common food allergens, including nuts and peanuts.
- Ensure that this allergen information is displayed clearly on the Allergy Data Sheet which is compiled daily by the Executive Chef and displayed on a dedicated board, next to the menu board, at the entrance to the canteen. From September 2021 all pre-packaged food will have a full ingredients list.

Policy last reviewed:

Next review due:

Person responsible for review:

Audience:

Trinity 2021

Trinity 2022

Bursar/Senior Nurse

Staff/Parents/Students

FOOD AND NUTRITION – USE OF ALLERGENS

Nuts are not used in Food and Nutrition, although other allergens may be used.

Management

- Students with food intolerances and allergies are identified in:
 - a) Teacher's mark book (once confirmed by health centre and individual student during H&S induction).
 - b) On the room layout/student location plan.
 - c) Photograph display in the Food and Nutrition office (supplied by the health centre).
- Girls must show their AAI before they enter the Food and Nutrition room.
- All students wash hands on entering the room before practical work commences and are expected to wash hands regularly throughout the lesson.
- Separate storage areas for cooked/prepared foods are used, including fridges.
- Separate ovens and grills are used to minimise cross-contamination.
- When food is made and consumed within the lesson, separate cutlery and crockery are used by all students for this purpose. Following consumption and handwashing, all items are sanitised thoroughly in the dishwasher.

Gluten intolerance

- When necessary, students with allergies to gluten work in the restricted zone of the kitchen.

Coeliac disease

- Girls with coeliac disease use their own 'coeliac equipment' housed in separate and clearly labelled cupboards and drawers.
- Following use of the equipment, the student hand washes and dries the items which are then removed and sanitised thoroughly in the dishwasher.

Action to be taken in the event of an Allergic Reaction

Mild-moderate allergic reaction

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

ACTION

- Stay with the child, call for help if necessary
- Give antihistamine (if vomited can repeat dose)
- Contact parent / carer



**Watch for signs of ANAPHYLAXIS
(life threatening allergic reaction)**

AIRWAY: Persistent cough, hoarse voice, difficulty swallowing, swollen tongue
BREATHING: Difficulty or noisy breathing, wheeze or persistent cough
CONSCIOUSNESS: Persistent dizziness / pale or floppy suddenly sleepy, collapse, unconscious

Appendix C

SHSK Allergen Policy

Dated Trinity 2021

If **ANY ONE** of these signs are present:

- 1) **Lie child flat.** If breathing difficult, allow to sit.
- 2) **Administer the student's Adrenaline Auto Injector (AAI) if prescribed.** This includes celery stalks, leaves, seeds and celeriac. Celery is commonly found in salt, breads, some meat products, soups and stock cubes.
- 3) **Dial 999 for an ambulance say ANAPHYLAXIS (ana-fi-laxis).** Cereals containing gluten: wheat, rye, barley and oats are often found in flour, baking powder, batter, breadcrumbs, bread, cakes, couscous, meat products, pasta, pastry, sauces, soups and fried food.

Major Allergens

If in doubt administer the student's AAI if prescribed.

After giving AAI: Eggs, Cakes, meat products, mayonnaise, mousses, pasta, quiche, sauces and pastries.

- 1) Stay with child, contact parent / carer
- 2) Commence CPR if no signs of life
- 3) If no improvement after 5 minutes, administer AAI again.

Additional Instructions: If milk powders, yamurt powder, soup and sauces for the student, give 10 puffs salbutamol (blue inhaler) (via spacer) and dial 999

Molluscs. Mussels, land snails, squid, whelks, oyster sauce and fish stews.

Mustard. Liquid, powdered and seeds. Used in breads, curries, marinades, meat products, salad dressings, sauces and soups.

Nuts. (note not peanuts as they are a legume). This refers to nuts which grow on trees, such as: cashews, almonds and hazelnuts. Commonly used in bread, biscuits, crackers, puddings, nut powders, stir-fried food, ice-cream, marzipan, nut oils and sauces.

Peanuts. Sometimes referred to as a groundnut as they are legumes and grow under the ground. Often used in biscuits, cakes, curries, puddings, sauces (e.g. satay), groundnut oil and peanut flour.

Sesame seeds. Often found in bread, breadsticks, hummus, sesame oil, tahini and salads.

Soya. Found in bean curd, edamame beans, miso paste, textured soya protein, soya flour, tofu, puddings, ice cream, meat products, sauces, vegetarian products and much oriental food.

Sulphur dioxide. Often found in dried fruit, meat products, soft drinks, vegetables, wine and beer. Asthmatics have a higher risk of developing a reaction to sulphur dioxide.

DEFINITIONS

- Allergen – A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.
- Allergy - A condition in which the body has an exaggerated response to a substance (e.g. food or drug). Also known as hypersensitivity.
- Allergic reaction – A reaction to an allergen. Common signs and symptoms include one or more of the following: hives, generalised flushing of the skin, tingling around the mouth, swelling of tissues of the throat and mouth, difficulty breathing, abdominal pain, nausea and/or vomiting, alterations in heart rate, sense of impending doom, **sudden feeling of weakness, collapse and unconsciousness.**
- Anaphylaxis – Anaphylaxis, or anaphylactic shock, is normally a sudden, severe and potentially life threatening allergic reaction to food, stings, bites, or medicines though a delayed reaction is possible in certain cases.
- Adrenaline Auto Injector (AAI) – AAI is a syringe style device containing the drug adrenaline which is ready for immediate intramuscular administration.
- Minimised Risk Environment - An environment where risk management practices have minimised the risk of (allergen) exposure to a reasonable level. Not an allergen free environment.
- Anaphylaxis Health Care Plan – A detailed document outlining an individual student's condition, treatment, and action plan for location of AAI.
- Management System – A record system managed by the person in charge which describes the individual student medical care plans and the particular members of staff who will need to be trained and informed of these plans.