Allergy Safety Policy

This policy will be implemented in a way which honours the vision that every FCJ school is a community of persons - students, staff, governors - bound together in mutual respect and ready to rely on each other in fulfilling their privileged task as educators in a Catholic school.

Mission Statement:

- To help everyone within a caring community to grow in faith
- To respect and value other cultures and faiths
- To make the most of every given ability
- To enjoy and achieve personal growth and academic excellence
- To prepare students for their Adult life, playing a full part in a modern global society

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1. Aims

This policy aims to:

- Set out our school's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction
- Make clear how our school supports students 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 statutory guidance on allergy safety in schools and supporting students 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

3.1 The governing board

The governing board is responsible for ensuring:

- Risks relating to students with allergy are included in the risk register and actively managed
- The school has an allergy safety policy which sets out:
    - Arrangements to reduce the risk of individuals coming into contact with their known allergens
    - Emergency response plans for cases of anaphylaxis

The governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

3.2 Allergy safety lead

The nominated allergy safety lead is Mr Ian Withers, who is also the Safeguarding Lead.

They are responsible for:

- Implementing this allergy safety policy
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published
- Promoting and maintaining allergy awareness across our school community
- Developing and reviewing arrangements for the safe storage and disposal of Adrenaline devices (AAI)
- Ensuring:
    - All allergy information is up to date and readily available to relevant members of staff
    - All students who require support with allergies have an up-do-date individual healthcare plan (IHP)
    - All students with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
    - All staff receive regular allergy awareness 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
    - Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
        - What lessons there are to learn
        - Any potential changes to the medical conditions and/or allergy safety policies and/or to any student's IHP

3.3 Headteacher

The Headteacher is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a student's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the student's circumstances

3.4 Staff

Mrs L McMillan, Senior Administrator is responsible for:

- Checking spare AAIs are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach

3.5 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among students
- Maintaining awareness of our allergy safety policy and procedures
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Being aware of specific students with allergies in their care
- Reducing the risk to students with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of students with allergies
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead.

3.6 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety 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 (AAI's) and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner
- Following the school's guidance on food brought in to be shared
- Updating the school on any changes to their child's condition

3.7 Students with allergies

The students are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AAI on their person and only using it for its intended purpose
- Understanding how and when to use their AAI

3.8 Students without allergies

These students are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Older students might also be expected to support their peers and staff in the case of an emergency.

4. Identifying individuals at risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis
- Asthma which may be triggered by airborne allergens
- Allergy to insect stings and medicines

4.1 Identifying students at risk

The school has a process for identifying students with known allergies.

We will:

- For new starters, send a form to all parent/carers of students after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the student has and whether they carry medication. Where a student has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers at the start of each year asking them to update their child's medical information as necessary (via Class Charts/SIMS)

We ask that parents/carers proactively inform us by either phone call to the school on 0151 727 2064, or an email to contactus@bellerivefcj.org if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

- Ask new staff to provide details of their allergies as part of the pre-employment screening process
- Visitors would be expected to provide details of their allergies in advance of their visit

4.3 Individual healthcare plans (IHP)

Students should have an IHP if they:

- Have an allergy which has a functional impact on them in the school environment
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally

It is not necessary for a student to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the student. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for students who are new to our school.

Not all children with an allergy will require an IHP. Some allergies will have little or no impact on the student while they are at school or pose no risk to the student. Some allergies will not require arrangements which are additional to or different from those made generally.

The Headteacher is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a student's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the student's circumstances.

The school will consider the following principles:

- If the arrangements or support which a student requires would be available to any student as part of normal policies, an IHP may not be required
- If the student only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHP may not be required

IHPs will be reviewed at least annually and more frequently if the student's needs have changed. Where a student moves on to a new school or college, their IHP will be shared as part of the transition.

4.4 Allergy and asthma action plans

All students who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All students who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the student's IHP. Whenever the allergy action plan is updated, the student's IHP should be reviewed to incorporate it.

4.5 Register of students with known allergies

This links to 'supporting students with medical conditions' policy.

- The school maintains a register of students who have a known allergy. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a student has been prescribed AAIs (and if so, what type and dose)
- Where a student has been prescribed an AAI, whether parental consent has been given to administer emergency medication
- A photograph of each student to allow a visual check to be made, with parental consent

- The register is kept in a location easily accessible to staff and in areas where food is served or handled and can be checked quickly by any member of staff as part of initiating an emergency response

Allowing all students to keep their AAIs with them will reduce delays and allows for confirmation of consent without the need to check the register.

5. Assessing risk

The school will conduct an individual student risk assessment for any student at risk of anaphylaxis which includes taking part in:

- Lessons such as food technology
- Science experiments involving foods
- Crafts using food packaging
- Off-site events and school trips
- Any other activities involving animals or food, such as animal handling experiences or baking

A risk assessment for any student at risk of an allergic reaction will also be carried out where a visitor requires a guide dog.

6. Minimising risk

6.1 Hygiene procedures

To minimise contamination in school:

- Students are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Students have their own named water bottles, and lunch boxes provided to students with food allergies will be clearly labelled with the name of the child for whom they are intended
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance
- School are working towards becoming a Nut Aware School

6.2 Catering/Food Sales

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

- Catering staff, including inhouse and contract staff, receive appropriate training and are able to identify students with allergies
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements
- School menus are available on the school website for parents/carers and students to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers

- Where changes are made to school menus, we will make sure these comply with legislation, and continue to meet any special dietary needs of students
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing students and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA)
- Where food is provided by the school, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination
- Cake or food sales organised in school will be considered in line with this policy.

6.3 Insect bites/stings

When outdoors:

- Food and drink should be covered and rubbish disposed off properly and safely
- Be observant of any infestation e.g. wasps around bins or nests etc

6.4 Animals

- Only guide dogs or therapy dogs are allowed on the school site
- All students will always wash hands after interacting with animals to avoid putting students with allergies at risk through later contact
- Students with animal allergies will not interact with animals

6.5 Visits and trips

- No students with allergies will be excluded from taking part in trip or visits due to having an allergy
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of students' allergies and to have received appropriate training
- The school will conduct a risk assessment for any student at risk of anaphylaxis taking part in a school trip, including catering aspects
- Students at risk of anaphylaxis should have their own AAIs with them
- Staff trained to administer Adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AAI protocols for off-site events and school trips (see section 8.5) dependant on the nature and location of the venue e.g. if remote location where emergency response could be delayed.

7. Procedures for handling an allergic reaction

Summary: Staff should recognise symptoms quickly, administer the student's Adrenaline auto-injector (AAI) immediately, call 999, keep the student lying down, and use the school's spare AAI if needed. These are located in each building at reception in a clear, labelled containers

Recognise symptoms immediately

- Swelling of lips/face
- Difficulty breathing, wheezing, coughing
- Hives, rash, itching
- Feeling faint, collapse
- Rapid progression of symptoms

If a student has an allergic reaction then staff should:

- Raise the alarm with another member of staff for support (send a student to the office/a colleague close by)
- Follow the student's Individual Healthcare Plan (if known)
- If the student has their own AAI, use that. If it is a student without an AAI, then one must be obtained from the closest location to where you are- this can be the second member of staff collecting one, while you monitor the student
- Administer the AAI, as per the training from the National College
- Call 999 and state "anaphylaxis". Emergency services must be contacted **immediately after giving the AAI**
- Request an ambulance urgently – the school office must do this
- **. Second Dose After 5 Minutes**
    - If no improvement: give a second AAI
    - Use the student's second device or the school spare
- Keep the student lying down, Do not allow them to stand or walk
- If breathing is difficult, allow them to sit with legs extended
- Ensure continuous monitoring until emergency services arrive
- Stay with the student
- Monitor breathing and consciousness
- Follow the school's allergy policy and Individual Healthcare Plan procedures
- Notify parents/carers
- Record the incident
- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately
- Staff are trained in the administration of Adrenaline to minimise delays in an emergency
- If the student has an allergy action plan, this must be followed
- A spare school AAI device will only be used if:
    - The student does not have a prescribed AAI
    - The student's prescribed AAI are not available or misfire

8. Adrenaline devices (AAIs)

Following the Department of Health and Social Care's Guidance on using emergency Adrenaline auto-injectors in schools, the school's procedures for AAIs, include:

8.1 Prescribed AAIs

Students who are prescribed AAIs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Students with prescribed AAIs should take them home with them at the end of each school day, and parents are responsible for ensuring that they are in date.

If a student cannot keep their AAIs with them in the classroom (due to age or other considerations), then the devices will be stored in the following locations. Sefton Park office / O'Neill Building, SENCO office / Elmfield Building, Pastoral office (second on the left) / Bellerive Building, inside the finance office. Each location is no more than 5 minutes away from where students are.

- AI's to kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature.

- Any students with prescribed AAI's must ensure that they carry them at all times including to and from school. This is to be discussed with the parents/carer

A copy of the student's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

- Students and parents/carers to take individually prescribed AAIs home (for example, at the end of the day for the journey home) and for checking that they remain in date Reminders are written in the IHP.
- Records will be kept of which students have been provided with prescribed Adrenaline (and an allergy action plan), Logged in the medical section of the students sims profile and the plan lodged in both sims and provision map

8.2 Spare AAIs and inhalers

Please note: current regulations only allow schools to purchase Adrenaline auto-injectors (AAIs) as spare devices. Non-injectable Adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal Adrenaline suffers anaphylaxis, a school's spare AAIs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the student's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare AAIs [and an emergency asthma reliver inhaler] and ensuring they are stored according to the guidance.

Spare AAIs will be stored:

- In an appropriate central location that is unlocked and accessible to **staff only** at all times – Sefton Park Office / Bellerive Building – Finance office / O'Neill Building – SENDCo office / Elmfield Building – Pastoral Office
- **No more than** 5 minutes away from where they may be needed (larger schools may require AAIs to be stored in multiple locations, such as near the dining area and playground)
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any students' prescribed AAIs and clearly labelled to avoid confusion

Leanne McMillan, First Aid Lead, is responsible for:

- Checking monthly that spare AAIs [and the emergency asthma reliver inhaler] are present and in date
- Obtaining replacement AAIs when the expiry date is near

8.3 Disposal

AAIs can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions.

8.4 Using spare AAIs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare Adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or students for spare Adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

8.5 Use of AAIs off school premises

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

Spare AAI's to be included in the first aid kit when students being taken offsite, dependant on the risk assessment. But returned to the appropriate office upon return to school

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a student, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident AAI circumstances been only slightly different.

9.1 Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and students responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

This information will be recorded on CPOMS/Accident/Incident/Near Miss form

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons.

9.2 Incident reporting

The parents/carers of a student aged up to 16 should be notified of the incident or 'near miss' as soon as possible. In the case of a student aged 16 and over, the school will confirm that the student agrees that their parents/carers should be informed. A member of the pastoral team or SEND team will contact home

The school will share the report with the student's parents, the student or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the student is at home. This means that incident reporting is not limited to staff – the student, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with Ian Withers. The allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the student's IHP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

- With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a student has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. Compliance Education to be consulted and they will make a RIDOOR report if necessary.

In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified.

10. Allergy awareness

10.1 Staff training

The school ensures that all staff expected to be present during times when students are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff (internal and external) and others who may oversee students at breakfast or after-school clubs. It does not include contractors carrying out work with no student-facing role such as builders, electricians or other AAI hoc maintenance personnel.

The school has purchased 'training pens' from EpiPen and Jext so staff can practise safely and be familiar with the differences.

Allergy awareness training will be provided via the National College CPD online training website ensuring that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist
- Understand the difference between food allergy, coeliac disease and food intolerance
- Know where to find information on allergy triggers
- Can identify the range of symptoms of allergic reactions
- Understand and can recognise anaphylaxis
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a student's wellbeing
- Understand the school's allergy safety policy
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss')

A Staff Training Matrix will be maintained by the allergy lead, and new staff will be added and be required to complete the training as part of their induction.

10.2 Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

Staff will be made aware of the policy via school briefings and re-visited during safeguarding and school INSET days

11. Wellbeing

Students with allergies may require additional support through:

- Pastoral care
- Regular check-ins with their class teacher/form tutor/etc.
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis
- Where required referral to school counselor
- When required external referrals to services can be made

11.1 Wellbeing support following an incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the student but their family, those involved in responding. and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See section 9 of the policy for more detail on incidents and 'near misses'.

12. Information sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

13. Monitoring arrangements

This policy will be monitored by the allergy safety lead.

It will be reviewed and approved annually by the allergy safety lead, or more frequently if a serious incident or 'near miss' identifies an area for improvement.

14. Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting students with medical conditions policy
- School food policy
- Data protection policy
- Behavior policy
- Safeguarding policy
- First Aid policy