Welwyn St Mary's C of E Primary School

Believe and Achieve

'With God, all things are possible' (Matthew 19:26)

Allergy Safety Policy

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WELWYN ST MARY'S C of E PRIMARY SCHOOL
Allergy Safety Policy

Our Vision – Believe and Achieve: 'With God, all things are possible' (Matthew 19:26)

At Welwyn St Mary's our school vision is 'Believe and Achieve' taken from St Matthew's gospel (Chapter 19, Verse 26 – 'With God, all things are possible'). By this, we aspire that all members of our community will flourish and be inspired to be the best that we can be by believing in ourselves, each other and in the teachings of Jesus. Believing in ourselves will give us the confidence to succeed. Believing in each other will empower others to do their best and by following the teaching of Jesus shows that His teaching drives all aspects of school life.

This vision is embodied and rooted in the Bible story of ***'The Miracle Catch of Fish'*** *(Luke 5: 4-11)*. It exemplifies our aspirations for our pupils and the importance our school places on believing in oneself (even when things may appear impossible or when solutions seem exhausted), in believing in each other and in putting one's trust and faith in God to give us the spiritual support, encouragement and determination to continue trying our very best to achieve, what may first appear unreachable, aspirational goals.

Contents

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 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 statutory guidance on allergy safety 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

3.1 The governing board

The governing board is responsible for ensuring:

- Risks relating to pupils with allergies 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 Julie Noakes, School Business Manager. 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 (AD)
- Ensuring:
  - All allergy information is up to date and readily available to relevant members of staff
  - All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP)
  - All pupils 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 pupil's IHP

3.3 Headteacher

The headteacher is responsible for:

Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil'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 pupil's circumstances

3.4 AAI Administrators

The Lead TA and member of the office team responsible for Medical Conditions (currently Katie Bryant and Ellen Jackson) are 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 pupils
- 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 pupils with allergies in their care
- Reducing the risk to pupils with known allergies coming into contact with known allergens
- Ensuring the wellbeing and inclusion of pupils 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 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 Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose
- Carrying their AD on their person and only using it for its intended purpose (children in Y5/6, at the request of a parent,only)
- Understanding how and when to use their AD
- Alerting an adult immediately if they are aware that they may be experiencing an allergic reaction.

3.8 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Following the school rules about bringing known allergens into school or sharing food.
- Older pupils 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 pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first day of school, to confirm any allergy the pupil has and whether they carry medication. Where medication is required, parents will be requested to complete a “request to administer medication” form before their child starts school and to provide two complete sets of medication, in a named bag, to the school office. These will be stored, together with a copy of the request to administer medications form and a copy of the child’s IHP, in the school office medical cabinet and class medical bags. Details of the allergy will be logged on Arbor, the school MIS.
- Where an existing pupil has a new diagnosis, we will request parents to email admin@welwynst-marys.herts.sch.uk with details of their child’s allergy and any necessary medication. Where medication is required, parents will be requested to complete a “request to administer medication” form and to provide two complete sets of medication, in a named bag, to the school office as soon as these can be obtained. These will be stored, together with a copy of the request to administer medications form and a copy of the child’s IHP, in the school office medical cabinet and class medical bags. Details of the allergy will be logged on Arbor, the school MIS.
- Send a reminder to parents/carers at the start of each year asking them to update their child’s medical information as necessary via the Arbor parent portal or email to admin@welwynst-marys.herts.sch.uk.

We ask that parents/carers proactively inform us by email to admin@welwnst-marys.herts.sch.uk if their child's medical needs change during the school year.

4.2 Identifying staff and visitors at risk

Staff are asked to declare any known allergies during their Occupational Health assessment prior to commencing work at Welwyn St Mary's. They will also be asked to confirm any medical conditions or allergies as part of our staff induction. Staff allergies will be recorded on Arbor, the school's MIS, and staff with allergies will be added to the school's allergy risk register.

Staff who develop new allergies during their employment at Welwyn St Mary's should notify the allergy safety lead as soon as possible by emailing julienoakes@welwynst-marys.herts.sch.uk so that risk registers and staff MIS records can be updated.

First time visitors to school are provided with a copy of the booklet "Information for visitors" and asked to read this as they sign in. This requests visitors to let school know of any known allergens. Visitors who are having a meal provided by school will be asked about allergies at the point of booking their meal.

4.3 Individual healthcare plans (IHP)

Pupils 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 pupil 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 pupil. 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 pupils 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 pupil while they are at school, or pose no risk to the pupil. 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 pupil'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 pupil's circumstances.

The school will consider the following principles:
- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHP may not be required
- If the pupil 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 pupil's needs have changed. Where a pupil 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 pupils 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 pupils 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 pupil's IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

4.5 Register of pupils with known allergies

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

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

The register is kept in the school office and in areas where food is served or handled. Photos of children on the allergy register are also displayed on the notice boards in the staff room and medical room and can be checked quickly by any member of staff as part of initiating an emergency response.

5. Assessing risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis 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 pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog or where other animals visit school (for example “reading dogs”)

6. Minimising risk

6.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Sharing of food, food containers, and food utensils is not allowed
- Pupils have their own named water bottles, and lunch boxes provided to pupils 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, for example ice creams during pantomimes.

6.2 Food bought into school

Welwyn St Mary’s is a nut free school. Children should not bring foods containing nuts or tree nuts of any description to school or to offsite visits. Parents are regularly reminded of this via newsletters and Parentmails.

Children are not permitted to bring in food to share with others for birthdays or other special events. Where children do bring in treats contrary to this policy, these will be retained by the teacher and returned to the parent at the end of the school day.

From time to time, special permission may be sought for a child to bring food to school to share, for example to celebrate a special religious event. In this instance the class teacher will seek permission from the Headteacher before agreeing to the event and conduct a risk assessment which takes into account all known allergies and dietary needs.

6.3 Catering

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

Catering staff receive appropriate training and are able to identify pupils 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 for parents/carers and pupils 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 pupils

Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils 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

6.3 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered
- When nests develop, the area immediately around the nest will be cordoned off. Children should not be allowed to play in this area until the registered pest control service has removed the source of the problem.

6.4 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 not interact with animals

6.5 Visits and trips

- No pupils with allergies will be excluded from taking part
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs 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 AD protocols for off-site events and school trips (see section 8.5)

7. Procedures for handling an allergic reaction

All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately

All Staff are trained in the administration of adrenaline to minimise delays in an emergency

If the pupil has an allergy action plan, this must be followed

A spare school AD device will only be used if:

  - The pupil does not have a prescribed AD
  - The pupil's prescribed AD are not available or misfire

Parents will always be contacted if the school suspects that a child has suffered an allergic reaction.

8. Adrenaline devices (ADs)

8.1 Prescribed ADs

Pupils who have been prescribed an AD must have 2 devices in school at all times. Parents are responsible for providing these and checking that they are in date, although reminders will be given by the office team in the run up device expiry.

For pupils in Reception to Year 4, ADs will be kept in 2 locations in school as follows:

- Medine Cabinet (unlocked) in the school office
- Class medical bag which is stored in the teacher's cupboard (unlocked)

For pupils in Years 5&6 who walk to school unaccompanied, parents may request that children keep their ADs on their person in their school bag so that these are with them during their journey to and from school. Pupils in younger year groups travel to and from school with an adult and it is expected that the adult will carry the appropriate ADs without requiring school devices. This reduces the risk of ADs being forgotten and children being in school without an prescribed AD.

Devices stored in school will be stored:

- In an appropriate central location that is unlocked and accessible at all times when pupils are onsite
- **No more than** 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature

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

When new devices are supplied, these should be handed in to the school office by a parent or other adult. A record will be kept of devices supplied including device type and expiration date and this will be added to the school's medication register.

8.2 Spare ADs 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 pupil's prescribed inhaler is not available and where written consent has been obtained.

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

Spare ADs will be purchased from Barnes Pharmacy in Welwyn Village.

School will keep 2 spare ADs suitable for use in children under 6 years of age (150mg) and 2 spare ADs suitable for use in children over 6 years of age (300mg)

Where possible, school will purchase EpiPen branded ADs as this is the brand prescribed to most of our children who require an AD. Devices will be purchased in pairs of the same brand to avoid confusion.

Spare ADs will be stored:

In the medical cabinet in the school office which is kept unlocked: This is:

- In an appropriate central location that is unlocked and accessible to **staff only** at all times
- **No more than** 5 minutes away from where they may be needed
- 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 pupils' prescribed ADs and clearly labelled to avoid confusion

The Lead TA and Medical Admin Assistant (currently Katie Bryant and Ellen Jackson) are responsible for:

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

8.3 Disposal

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

8.4 Using spare ADs 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 pupils 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 ADs off school premises

Pupils in Years 5&6 at risk of anaphylaxis who are able to administer their own adrenaline may carry their own ADs with them on school trips and off-site events at the request of parents. In these circumstances, Trip leaders should check that children have 2 ADs with them before leaving site.

For all other children, the class teacher will be responsible for ensuring that 2 ADs are present at any time a child is out of school, including for local visits e.g. to Church. 2 ADs must also be taken to the sports field if PE lessons are taking place in the Ottway Walk sports field. The class teacher (or trip leader in the absence of the class teacher e.g. for sporting events) will take the class medical bag, containing 1 AD, on any offsite visit and will collect the child's second AD from the school office prior to departure. The second AD will be returned to the school office on return from the trip.

9. Serious incidents and 'near misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, 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 had 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 using the HCC AIRS accident reporting system, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)

- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded

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 pupil aged up to 16 should be notified of the incident or ‘near miss’ as soon as possible.
The school will share the report with the pupil’s parents, the pupil 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 pupil is at home. This means that incident reporting is not limited to staff – the pupil, 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 the allergy safety lead (currently Julie Noakes) and the Headteacher. 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 pupil’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 pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See how to make a RIDDOR report]

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 pupils 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 and agency workers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad 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 ensure 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 pupil'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')

Allergy awareness training is conducted online via eLearning supplied by "The Key". All staff are required to complete allergy awareness training as part of induction and annually thereafter every September. Compliance will be monitored by the training administrator.

All staff will be reminded of school policies and processes around Allergy Safety during INSET day training (teachers) and Learning Communities (Support Staff) during the Autumn term. Administrative and site staff will be briefed by the Allergy Safety Lead.

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.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

Pupils will receive information about allergy safety during key stage assemblies at least annually.

11. Wellbeing

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their class teacher
- Reassurance that steps are being taken to minimise the risks of exposure to allergens and that robust measures are in place in the event of anaphylaxis
- The school will respond to any instance of bullying in line with its behavior policy.

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 pupil 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.

Serious incidents and 'near misses' will be reported to the governing body as part of Health and Safety monitoring arrangements, alongside other AIRS reports.

14. Links to other policies

This policy links to the following policies and procedures:

Health and safety policy

Supporting pupils with medical conditions policy

School food policy

Data protection policy

Behavior policy