YARM SCHOOL

Whole School Allergy Policy

This policy applies to the whole school and is published to parents.

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1. Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis. Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, however, reactions can be delayed and occur hours later. Common allergens include food, medicines/drugs, insect stings as well as skin allergies (latex/adhesive for example).

Anaphylactic reaction is suspected when it involves difficulty breathing, swelling of the airway and/or affects the heart rhythm or blood pressure.

It is possible to be allergic to anything which contains a protein, however most people will react to a small group of potent allergens. The most common UK allergens include (but are not limited to):

Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen, Animal Dander and Medicines.

This policy aims to set out how Yarm School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2. Role and responsibilities

Parent Responsibilities

• On entry to the school, it is the parent's responsibility to inform Yarm School via the admission Medical Information Form of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.

• Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with the child's GP and/or Allergy Specialist.

• Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.

• Parents must keep the school up to date in a timely manner with any changes in allergy management by contacting the School Office. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

• All First Aid Trained staff will complete anaphylaxis training as part of their three yearly qualification.

• All staff will receive an annual update on allergy management and EpiPen use at the beginning of the School Year

• Staff must be aware of the pupils in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. All pupils with known allergies have a medical flag attached to their iSAMS record. There is also a paper copy of medical flags available in the staff room which is updated termly.

• Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

• It is the parent's responsibility to ensure all medication is in date however, the First Aid Lead will check medication kept at school on a termly basis and send an email reminder to parents if medication is approaching expiry.

• First Aid Lead keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given.

Pupil Responsibilities

• Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.

• Pupils who are trained and confident to administer their own AAIs will be encouraged to take responsibility for carrying them on their person at all times.

3. Allergy Action Plans

Allergy action plans are designed to function as individual healthcare plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction.

Yarm School recommends using the British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans to ensure continuity. This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/Allergy Specialist) and provide this to the School.

Individual health care plans (IHCP) are required for each child where their allergy requires active management at school. Mrs. Wheatley will send this IHCP to parents of pupils with known allergies for completion. These will be displayed in the Medical Room at each school site.

4. Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.
Mild to moderate allergic reaction symptoms may include:

• a red raised rash (known as hives or urticaria) anywhere on the body
• a tingling or itchy feeling in the mouth
• swelling of lips, face or eyes
• stomach pain or vomiting.

More serious anaphylactic symptoms are often referred to as the ABC symptoms and can include:

• AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).

• BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.

• CIRCULATION - dizziness, feeling faint, sudden sleepiness, tiredness,
confusion, pale clammy skin, loss of consciousness.

In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and result in collapse, loss of consciousness and can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

As soon as anaphylaxis is suspected, adrenaline must be administered without delay.

• CALL 999 and state ANAPHYLAXIS

• Keep the child where they are, call for help and do not leave them unattended.

• LIE CHILD FLAT WITH LEGS RAISED – they can be propped up if struggling to breathe but this should be for as short a time as possible.

• USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY and note the time given. AAIs should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.

• If no improvement after 5 minutes, administer a second AAI.

• If no signs of life commence CPR.

• Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

5. Supply, storage and care of medication

In the Senior School, pupils will be encouraged to take responsibility for and to carry their own AAIs on them at all times. Additional EpiPens can be stored in the Medical Room.

For pupils in Nursery, Pre Prep and Prep School or those not ready to take responsibility for their own medication:

Medication will be stored in the medical room in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain two AAI's along with any other medication prescribed to manage their allergy (oral antihistamines/inhaler).

Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a sharps bin. The sharps bin is kept in the Senior School Medical Room and Prep School Medical Room.

Emergency AAI's in School

Yarm School has purchased spare AAIs for emergency use. These are stored in a green container, clearly labelled 'Emergency Adrenaline Pen'.

Yarm School holds **EIGHT** spare pens which are kept in the following locations:

- Senior School Medical Room (Main Office)
- Prep School Medical Room
- Pre Prep Medical Room

The First Aid Lead is responsible for checking the emergency medication is in date and to replace as needed.

If anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

7. Staff Training

The named staff members responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

- First Aid Lead: Mrs Lyndsey Wheatley
- Named Allergy Lead: Mrs Alex Kingsbury
- Named Allergy Governor: Mrs Shazia Akowuah

All staff will complete online Allergy and Anaphylaxis Training for Schools at the start of every new academic year. Training is also available during induction for any new members of staff.

Training includes:
• Knowing the common allergens and triggers of allergy
• Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
• Administering emergency treatment (including AAIs) in the event of anaphylaxis – knowing how and when to administer the medication/device
• Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance, knowing who is responsible for what
• Managing allergy action plans and ensuring these are up to date

• All First Aid Trained Staff have Anaphylaxis awareness and AAI use as part of their three yearly course. Training pens are available to simulate and practise as and when required. An annual update is given to staff at the beginning of the academic year.

8. Inclusion and safeguarding

Yarm School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

9. Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

A daily allergen list is produced for all the meals served within the catering department and this information is displayed during service and retained for a period of 3 months.

The First Aid Lead will inform the Catering Manager of pupils with food allergies and this is checked at the start of each new term and the information is held in a file within the catering department with all the relevant information on that student's allergy.

The school adheres to the following Department of Health guidance recommendations:

• The pupils are introduced to the Allergen Champion, so they are aware of who to go to before selecting their lunch choice.
• All the catering staff are educated and trained with refresher training each year about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager.
• Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
• Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

10. School trips

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

Overnight school trips require careful planning and a meeting with parents may be required with the lead member of staff planning the trip. Staff at the venue for an overnight school trip should be

briefed that an allergic child is attending and will need appropriate provisions (if provided by the venue).

Sporting Excursions

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the Games staff are fully aware of the situation. The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team.

11. Reporting of Incidences, Near Misses, and Post-Incident Reviews

Administration of any medicines (including antihistamine and AAIs) will be documented in the Medication Record Book.

If a child, staff member or visiting member of the public suffers an allergic reaction on the school site a Pink RIDDOR Report must be completed and sent to Mr M Rathmell.

In the case of a 'near miss', the same applies. A pink RIDDOR must be completed and sent to Mr M Rathmell.

Post-Incident Review Process: Following any significant allergic reaction or near-miss, a formal ; lessons learnt' review will be conducted within 72 hours. This process involves:

- **Debrief Meeting**: Coordinated by the Allergy Lead, involving relevant staff, the Catering Manager (if applicable), and a member of the Senior Leadership Team to ensure a whole-school approach.
- **Root Cause Analysis**: Evaluating why the incident occurred, identifying any gaps in systems, training, or communication.
- **Action & Implementation**: Reviewing and updating the affected pupil's Individual Healthcare Plan (IHP) if necessary. If systemic improvements are identified, the wider school Allergy Policy and staff training modules will be updated accordingly.
- **Documentation**: A record of the review and any resulting actions will be maintained centrally by the Allergy Lead to demonstrate compliance and ongoing improvement as required by statutory guidance.

Any incidents and or near misses that occur in the kitchen, the Catering Manager, Head Chef or the Allergen Champion must be notified, Sodexo will then investigate and report to the Sodexo Health and Safety Office and Mark Rathmall.

12. Useful Links

- Anaphylaxis UK
- Safer Schools Programme
- AllergyWise for Schools online training
- Allergy UK
- Allergy UK - Managing allergies at school
- BSACI Allergy Action Plans
- Spare Pens in Schools

- Department for Education Supporting pupils at school with medical conditions
- Department of Health Guidance on the use of adrenaline auto-injectors in schools
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016)
- Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020)

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