



Allergies and Intolerances Policy

June 2020

**ALLERGIES AND INTOLERANCES POLICY
QUEENSGATE FOUNDATION PRIMARY SCHOOL**

Policy Review

This policy is reviewed in full by the Governing Board on a two-yearly basis.

The policy was last reviewed and agreed by the Governing Board on 16th June 2020

It will be reviewed again in June 2022.

Approved



Signature: Head Teacher

Date: 16th June 2020



Signature: Chair of the Governing Board

Date: 16th June 2020

Policy control

| Date | Amendments / additions | Reason |
|--------------|------------------------|--------|
| June 2020 V1 | | |
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This policy is concerned with a whole school approach to the health care and management of those members of our school community suffering from specific allergies and intolerances.

Queensgate Foundation Primary School is aware that our children may suffer from food, bee/ wasp sting, grass and pollen, animal or nut allergies and we believe that all allergies and intolerances should be taken seriously and dealt with in a professional and appropriate way.

Queensgate Foundation Primary School's position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure, encourage self-responsibility and plan for effective response to possible emergencies.

Queensgate Foundation Primary School is committed to no food and drink sharing.

The *Statutory Framework* states that the provider must obtain information about any dietary requirements/allergy. As such families are asked to provide details of allergies and intolerances in the child's School Admissions Forms, which are submitted before starting school.

Aim:

The intent of this policy is to minimise the risk of any child suffering allergy-induced anaphylaxis whilst at school.

An allergic reaction to nuts is usually the most common high risk allergy and as such demands more rigorous controls throughout the policy.

The underlying principles of this policy include:

- The establishment of effective risk management practices to minimise the child, staff, family member and visitor exposure to known trigger foods and insects
- Staff training and education to ensure effective emergency response to any allergic reaction situation

This policy applies to all members of the school community:

- School Staff
- Families
- Volunteers
- Supply staff
- Children
- Students

Definitions:

Allergy - A condition in which the body has an exaggerated response to a substance (e.g. food and drug) also known as hypersensitivity.

Allergen - A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.

Anaphylaxis - Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines. Epipen - Brand name for syringe style device containing the drug Adrenalin, which is ready for immediate inter-muscular administration.

Intolerance - an inability to eat a food or take a drug without adverse effects. Minimized Risk Environment - An environment where risk management practices (e.g. Risk assessment forms) have minimised the risk of (allergen) exposure.

Health Care Plan or Individual Risk Assessment - A detailed document outlining an individual child's condition treatment, and action plan for location of Epipens

Procedures and Responsibilities for Allergy and Intolerance Management:

1. General

- 1.1 The involvement of families and staff in establishing individual Health Care Plans or Risk Assessments where needed
- 1.2 The establishment and maintenance of practices for effectively communicating a child's healthcare plans or risk assessments to all relevant staff
- 1.3 Staff training in anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency
- 1.4 Age appropriate education of the children with severe food allergies or intolerances

2. Medical Information

- 2.1 The school will seek updated information via medical form at the commencement of each calendar year.
- 2.2 Furthermore, any change in a child's medical condition during the year must be reported to the school.
- 2.3 For children with an allergic condition or intolerance, the school requires families to provide written advice from a doctor (GP), which explains the condition, defines the allergy or intolerance triggers and any required medication.
- 2.4 The Headteacher will ensure that a Health Care Plan or Risk Assessment is established and updated for each child with a known allergy or intolerance. These are completed by a member of the Inclusion Team
- 2.5 All members of staff are required to review and familiarise themselves with the medical information.
- 2.6 Children with allergies or intolerances will have a recent photograph and information regarding their medical needs posted in relevant rooms with parental permission.
- 2.7 Where children with known allergies or intolerances are participating in school excursions, the risk assessments must include this information.
- 2.8 The wearing of a medic-alert bracelet is allowed by the School

3. Medical Information (Epipens)

Where Epipens (Adrenalin) are required in the Health Care Plan or Risk Assessment:

- 3.1 Families are responsible for the provision and timely replacement of the Epipens
- 3.2 The Epipens are located securely in relevant locations approved by the Headteacher
- 3.3 Epipens will be located so that all adults involved with the child know where they are at all times

4. The Role of Families

Families are responsible for providing, in writing, on-going accurate and current medical information to the school.

Families are to send a letter to the school confirm and detail the nature of the allergy or intolerance; including:

- 4.1 The allergen (the substance the child is allergic to)
- 4.2 The nature of the allergic reaction (from rash, breathing problems to anaphylactic shock)
- 4.3 What to do in case of allergic reaction, including any medication to be used and how it is to be used.
- 4.4 Control measures – such as how the child can be prevented from getting into contact with the allergen
- 4.5 If a child has an allergy requiring an Epipen, or the risk assessment deems it necessary, a Health Care Plan or Risk Assessment must be completed and signed by the families
- 4.6 It is the responsibility of the families to provide the school with up to date medication / equipment clearly labelled in the original packaging
- 4.7 In the case of life saving medication like Epipens the child will not be allowed to attend without it

- 4.8 Families are also required to provide up to date emergency contact information
- 4.9 Snacks and lunches brought into school are provided by each child's family
- 4.10 It is the family's responsibility to ensure that the contents are safe for the child to consume
- 4.11 Families should liaise with Staff about appropriateness of snacks and any food- related activities (e.g. cooking)

We realise as a school that some families may share information about allergies or intolerances that have not been medically identified. However, we will treat this information in the same way.

5. The Role of Staff

Staff are responsible for familiarising themselves with the policy and to adhere to health & safety regulations regarding food and drink:

- 5.1 If a child's School Admissions Form states that they have an allergy or intolerance then a Health Care Plan or Risk Assessment is needed. A Risk Assessment should be carried out and any actions identified to be put in place. The Assessment should be stored with the child's Health Care Plan
- 5.2 All staff who come into contact with the child will be made aware of what treatment/medication is required by the Headteacher or First Aiders and where any medication is stored
- 5.3 All staff are to promote hand washing before and after eating
- 5.4 Snack time foods are monitored by staff and are peanut, nut free and other allergens depending on the children attending. All staff should know the procedures at snack and lunch time to ensure the safety of children with allergies or intolerances. However staff cannot guarantee that foods will not contain traces of nuts
- 5.5 All tables are cleaned with an approved solution
- 5.6 Children are not permitted to share food
- 5.7 We provide specific Epipen use training through the school nursing team
- 5.8 We may ask families for a list of food products and food derivatives the child must not come into contact with
- 5.9 Emergency medication should be easily accessible, especially at times of high risk
- 5.10 Staff should liaise with families about snacks and any food-related activities

6. Actions

In the event of a child suffering an allergic reaction:

- 6.1 We will delegate someone to contact the child's families
- 6.2 If a child becomes distressed or symptoms become more serious telephone 999
- 6.3 Keep calm, make the child feel comfortable and give the child space
- 6.4 If medication is available it will be administered as per training and in conjunction with the Supporting Pupils with Medical Conditions Policy
- 6.5 If families have not arrived by the time ambulance arrives, a member of staff will accompany the child to hospital

7. Role of other families

Snacks and lunches brought into the school by other families should be peanut and nut free wherever possible.

The school will ensure that families are regularly reminded and will monitor the contents of lunchboxes and snack.

8. Caterlink

Caterlink is our current school lunch provider and have their own policy for food allergies. Families are required to make an appointment with the School Cook and provide a current medical letter stating the allergy or intolerance of their child.

