St John Fisher Catholic College Allergy Policy

Headteacher: Mr G Murray

Allergy Lead: Ms J Rogers

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Policy Review Due Date: July 2027

St John Fisher Catholic College is committed to promoting a whole school approach to health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way.
This policy has been developed using the DfE statutory guidance and model template provided and fulfils obligation from Section 34 of the Children's Wellbeing and Schools Act 2026 that requires all schools to have an allergy safe policy.
This policy will be bought to the attention al all learners, parents / carers and everyone working at the school at least annually as well as being available on our school website, and a free written copy can be provided on request. This policy is reviewed annually as a minimum but is also reviewed after every serious or "near miss" incident. Allergy, asthma and other health care policies are outlined to all parents as part of further induction processes and all parents and carers are alerted to where these policies can be found.

By our actions we will work proactively to:

- Annually train all staff on allergy awareness and emergency responses and school procedures, including documenting "near miss" incidents.
- Ensure that all supply staff, including peripatetic teachers are aware of the school policy and receive training
- minimise the risk of exposure within the school setting
- encourage self-responsibility
- learn avoidance strategies
- have robust plans for an effective response to possible emergencies
- ensure inclusivity for all pupils

St John Fisher Catholic College is clear about the need to actively support pupils with medical conditions to participate in school life. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all aspects of school life. Risk assessments will be carried out so that planning arrangements

take account of any steps needed to ensure that pupils with medical conditions are included.

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.
Many allergies can be connected to food; however it is important to note that A **food allergy** is an immune system response that can be life-threatening. A **food intolerance** is a digestive problem where the body cannot properly break down a food, and it is never life-threatening. **Coeliac disease** is a serious autoimmune condition where the body attacks its own tissues when gluten is eaten.

Other allergies can also co-exist with other conditions such as hay fever, asthma, eczema.

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, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs. Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation). It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to):-
Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how St John Fisher Catholic College will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

Role and responsibilities

Parent Responsibilities
• It is the parent's responsibility to inform the school 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 to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. School nurse/GP/allergy specialist.
• Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
• Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

SLT lead- Ms J Rogers, responsibility for ensuring the implementation of the policy as well an annual reviewing and updating where applicable.

• This policy is also for all staff with known allergies, It is their responsibility to make the school aware of their allergy, triggers and medication needed.
All staff will complete annual anaphylaxis training. Training is provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.
• 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. Any food-related activities must be supervised with due caution.
Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, and have their medication. **Pupils unable to produce their required medication will not be able to attend the excursion.**
• School will ensure that the up-to-date Allergy Action Plan is kept on file.
• It is the parent's responsibility to ensure all medication is in date however the School First Aider will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
• Health and Safety admin keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any 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 them.

Allergy Action Plans as part of a child's Individual Healthcare Plans

Allergy action plans are designed to function as part of a child's 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, including consent to administer a spare adrenaline autoinjector. Where a learner needs additional arrangements because of the risk associated with their condition, their IHP should reference / attach their Asthma Healthcare plan as well as an Allergy individual healthcare Plan.
It is the parent/carer's responsibility to complete the allergy healthcare plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.
Under GDPR requirements, a child's IHP is sensitive data and so this information can be accessed through the secure staff Teams. Schools have a legal basis to hold, use and share this important health data but all storage of this data is done in a controlled and safe way so to avoid unnecessary sharing.

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 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.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, 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.
Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?
• It opens up the airways
• It stops swelling
• It raises the blood pressure

As soon as anaphylaxis is suspected, adrenaline must be administered without delay.
Action:
• 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.
• CALL **999** and state **ANAPHYLAXIS (ana-fil-axis).**
• If no improvement after 5 minutes, administer 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.

Supply, storage and care of medication
Depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to carry their own **AAIs** on them at all times (in a suitable bag/container).

Medication and spare AAI's, labelled clearly SPARE, are stored in a suitable container and clearly labelled with the pupil's name.

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the school will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

Older children and medication
Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on **very suddenly**, so school staff need to be prepared to administer medication.

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 pre-ordered sharps bin. The sharps bin is kept in the main office.

'Spare' adrenaline auto-injectors in school
St John Fisher Catholic College has purchased spare **AAIs and kits for emergency use in children who are risk of anaphylaxis,** but their own devices are not available or not working. The kit is stored in the drawer labelled epi pens in the main office labelled "Emergency spare school epi pen". This is not locked away and is accessible and known to all staff. Two spare epi pens are also stored in the 6th form centre office on the top floor of Romero building to ensure that nobody is more than five minutes from access to adrenaline. These AAI are checked regularly by the health and safety admin and are 300mcg each.

The health and safety admin is responsible for checking the spare medication is in date on a monthly basis and to replace as needed.
Written parental permission for use of the spare AAIs is included in the pupil's allergy action plan.

<u>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 an AAP is appropriate.</u>

<u>The school is aware that it is best practice to ensure that no person with a known allergy is more than 5 minutes away from an adrenaline source. The school is aware that adrenaline sources should be stored in pairs. The school takes measures to support these requirements by having EpiPens in the main office (and also in Romero building.</u>

All staff will complete anaphylaxis training annually. Training is also available on an ad-hoc basis 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

Inclusion, WELLBEING and safeguarding
St John Fisher Catholic College 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. Any form of child on child abuse connected to allergy conditions will be swiftly dealt with including education to those involved in the importance of allergy awareness.

Minimising Risk
The school will work with parents, the child and this policy to ensure that through knowing IHP, measures will be taken to manage the risks of exposure to the child, be that through food or other triggers. For catering requirements we will:

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.
The school menu is available for parents to view on the school website with all ingredients listed and allergens highlighted.

The Catering Manager will be informed of pupils with food allergies.

• Where food is provided by the school, staff should be educated 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.
• 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.

- **Learners are able to bring in packed lunches and these may contain foods that are triggers for others. To minimise risk all lunch time supervisors are allergy trained and a first aider is present at lunch times to assist.**
- **During fundraising events such as cake sales, learners are only permitted to bring in bought, sealed cakes that have a clear ingredients list to support with minimising risk.**

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.
Every reasonable step will be taken to enable participation, buy ultimately pupils unable to produce their required medication may not be able to attend the excursion if the necessary medication to keep the learner safe cannot be provided and the risk cannot otherwise be safely managed. To minimise the risk of this the school will work with the childs's family to ensure that all avenues to provide the necessary medication are exhausted.
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 should be possible with careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (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 P.E. teacher/s 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 (a first aider) will accompany the team.
Most parents are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

We advocate a culture of allergy awareness and education.

A "whole school awareness of allergies' is a much better approach, as it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

Risk Assessment

St John Fisher Catholic College will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping allergic children safe and develop a care plan.

Near Miss

Following a serious allergy incident, including a "near miss" the school will look to review practices to ensure that appropriate steps were taken and that where necessary, updates to this policy, IHP and practices are made.

A near miss, may include a child becoming unwell at home due to exposure in school that was not recognised. It is important therefore, that families and other health care professionals report this incident to the school.

All accident logs, including allergy incidents, are reported to the governors termly as well as to St Gabriel the Archangel Multi Academy Trust.