# **Ballyclare Secondary School**



# **Food Allergy Policy**

"Every child deserves a rewarding educational experience."

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# <u>Rationale</u>

Ballyclare Secondary School aims to minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.

#### Links with other policies

The named staff members responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are: Ms N Yetman (School Nurse) and Mr A Nicholl (Vice Principal – Acting – Pastoral Care).

#### <u>Aims</u>

The school understands that food allergies are potentially life threatening, particularly if poorly managed. The school has a full-time qualified nurse who will be involved in the management of children with food allergies and provide care, support and advice where appropriate.

The Home Economics Department aims to provide our pupils with a wide range of educational experiences including working with a variety of different ingredients. Our aims are:

- For staff to acquire knowledge, skills and practical abilities in the management of food allergies within the school.
- To raise awareness of foods that could potentially trigger food allergies.
- To safely manage the risk of foods that may trigger an allergic reaction.
- To encourage parents and pupils to take ownership of their own wellbeing, including how food allergies are managed.

## 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, 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.

It is estimated that between 1-10% of adults and children have a food hypersensitivity. However, as many as 20% of the population experience some reactions to foods which make them believe they do have a food hypersensitivity (BDA, 2015).

In the UK, there are 14 food allergens that are recognised as the most common ingredients that can cause allergic reactions.

The 14 allergens are: celery, cereals containing gluten (such as wheat, barley and oats), crustaceans (such as prawns, crabs and lobsters), eggs, fish, lupin, milk, molluscs (such as mussels and oysters), mustard, peanuts, sesame, soybeans, sulphur dioxide and sulphites (if the sulphur dioxide and sulphites are at a concentration of more than ten parts per million) and tree nuts (such as almonds, hazelnuts, walnuts, brazil nuts, cashews, pecans, pistachios and macadamia nuts).

"17% of fatal food-anaphylaxis reactions in school-age children happen while they are at school and 20% of anaphylactic reactions in schools are in children with no prior history of food allergy." (Allergy UK, 2024).

This policy sets out how Ballyclare Secondary School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life, particularly within the Home Economics Department.

# Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform Home Economics staff/ School Nurse of any food 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.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary, in line with our *Medical Policy*.
- 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

- Staff will complete anaphylaxis training, in keeping with EA's school nursing team online programme, as of the academic year 2024/2025. Training is/will be provided for staff on a yearly basis and on an ad-hoc basis for any new members of staff. The School Nurse and Vice Principal – Pastoral Care will monitor those who have full first aid certificates within the body of staff.
- Home Economics 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. Any practical lessons must be supervised with due caution.
- The School Nurse will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date. However, the School Nurse will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- The School Nurse keeps a register of pupils who have been prescribed an adrenaline autoinjector (AAI) and a record of use of any AAI(s) and emergency treatment given.
- Home Economics staff will have a record identifying pupils who have known allergies. This record will be on display within the resource room for HE Technician staff, as well as Home Economics Teachers.
- All recipes used within the HE Department will display potential allergens within the ingredients.

# 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.
- Within a Home Economics lesson, pupils will be asked to put their AAIs in a visible place for easy access (e.g., the Teacher's desk), if required.

# 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, including consent to administer a spare adrenaline autoinjector.

Ballyclare Secondary 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.

#### 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.

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

#### 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 **two** AAIs on them at all times (in a suitable bag/container).

Medication should be stored in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain:

- Two AAIs i.e., EpiPen® or Jext® or Emerade®
- An up-to-date allergy action plan
- Antihistamine as tablets or syrup (if included on allergy action plan)
- Spoon if required
- Asthma inhaler (if included on allergy action plan)

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 Nurse 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.

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

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. Sharps bins to be obtained from and disposed of by a clinical waste contractor. The sharps bin is kept in the Nurse's room.

#### 'Spare' adrenaline auto-injectors in school

Ballyclare Secondary School holds spare **AAIs for emergency use in children who are risk of anaphylaxis,** but their own devices are not available or not working (e.g. because they are out of date).

These are stored in a clearly labelled 'Emergency Anaphylaxis Adrenaline Pen', kept safely, not locked away in the Nurse's room and **accessible and known to all staff.** 

The School Nurse 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.

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.

# Staff Training

The named staff members responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are: Ms N Yetman (School Nurse) and Mr A Nicholl (Vice Principal – Acting – Pastoral Care).

All staff will complete online EA anaphylaxis training at the start of every new academic year. 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
- A practical session using trainer devices (these can be obtained from the manufacturers' websites: www.epipen.co.uk and www.jext.co.uk and <u>www.emeradebausch.co.uk</u>)

#### Inclusion and safeguarding

Ballyclare Secondary 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.

#### Home Economics Department

- All ingredients used for practical lessons are purchased from a range of local suppliers. Every effort is made to reduce the risk of foods that could cause an allergic reaction.
- Home Economics 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.
- UK food labelling laws require all potential allergens to be highlighted and while high risk foods will not be used in recipes, it is impossible to eliminate all risks. It is impossible to promote a sterile environment within Home Economics, so responsibility is required from staff and pupils alike to safely manage risk.
- All recipes used within the department will highlight potential allergenic ingredients so that pupils can make an informed decision regarding that particular lesson.
- Staff will endeavour to make reasonable adjustments to recipes using low risk ingredients.

## Allergy awareness and nut bans

Ballyclare Secondary School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt 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.

### Useful Links

- Anaphylaxis UK https://www.anaphylaxis.org.uk/
- Safer Schools Programme https://www.anaphylaxis.org.uk/education/saferschoolsprogramme/
- AllergyWise for Schools online training <u>https://www.allergywise.org.uk/p/allergywise-for-schools1</u>
- Allergy UK <u>https://www.allergyuk.org</u>
- Resources for managing allergies at school <u>https://www.allergyuk.org/living-withan-allergy/at-school/</u>
- BSACI Allergy Action Plans https://www.bsaci.org/professionalresources/ resources/paediatric-allergy-action-plans/
- Spare Pens in Schools http://www.sparepensinschools.uk
- Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016) <u>https://www.nice.org.uk/guidance/qs118</u>
- Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020) https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834