

The logo for Avondale Primary School features the word 'Avondale' in a black, cursive script font. A large, thick red checkmark is superimposed over the letter 'v'. Below 'Avondale', the words 'Primary School' are written in a black, sans-serif font.

Avondale
Primary School

Food Allergy Policy

Adopted by Governors October 2023

Introduction

Avondale School recognises that a number of community members (pupils, parents, visitors and staff) may suffer from potentially life-threatening allergies or intolerances to certain foods.

Avondale School is committed to a whole school approach to the care and management of those members of the School community. This policy looks at food allergy and intolerances in particular.

The School's position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure by hazard identification, instruction and information. This will encourage self-responsibility to all those with known allergens to make informed decisions on food choices. It is also important that the School has robust plans for an effective response to possible emergencies. This policy has been created with guidance from the School's Catering Advisor, under the Food Information for Consumers Regulation (1169/2011) which came into force in December 2014.

The School is committed to proactive risk food allergy management through:

- The encouragement of self-responsibility and learned avoidance strategies amongst those suffering from allergies.
- The establishment and documentation of a comprehensive management plan for menu planning, food labelling, stores and stock ordering and customer awareness of food produced on site.
- Provision of a staff awareness programme on food allergies/intolerances, possible symptoms (anaphylaxis) recognition and treatment.

The intent of this policy is to minimise the risk of any person suffering allergy-induced anaphylaxis, or food intolerance whilst at Avondale School or attending any School related activity. The policy sets out guidance for staff to ensure they are properly prepared to manage such emergency situations should they arise. It is also intended to outline how information can be accessed to food allergens in the Catering facilities.

The common causes of allergies relevant to this policy are the 14 major food allergens:

- Cereals containing Gluten
- Celery including stalks, leaves, seeds and celeriac in salads
- Crustaceans, (prawns, crab, lobster, scampi, shrimp paste)
- Eggs - also food glazed with egg

- Fish - some salad dressings, relishes, fish sauce, some soy and Worcester sauces □
Soya (tofu, bean curd, soya flour)
- Milk - also food glazed with milk
- Nuts, (almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio, cashew and macadamia (Queensland) nuts, nut oils, marzipan)
- Peanuts - sauces, cakes, desserts, ground nut oil, peanut flour
- Mustard - liquid mustard, mustard powder, mustard seeds
- Sesame Seeds - bread, bread sticks, tahini, houmous, sesame oil
- Sulphur dioxide/Sulphites (dried fruit, fruit juice drinks, wine, beer)
- Lupin, seeds and flour, in some bread and pastries
- Molluscs, (mussels, whelks, oyster sauce, land snails and squid).

The allergy to nuts is the most common high risk allergy and, as such, demands more rigorous controls. However, it is important to ensure that all allergies and intolerances are treated equally as the effect to the individual can be both life-threatening and uncomfortable, if suffered.

Definitions

<i>Allergy</i>	A condition in which the body has an exaggerated response to a substance (e.g. food or drug), also known as hypersensitivity.
<i>Allergen</i>	A normally harmless substance, that triggers an allergic reaction in the immune system of a susceptible person.
<i>Anaphylaxis</i>	Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to a trigger (food, stings, bites, or medicines).
<i>Adrenalin Auto Injectors</i>	A syringe style device containing the drug adrenaline. This is an individual prescribed drug for known sufferers which is ready for immediate intramuscular administration. This may also be referred to as an Epi-Pen/ Ana pen or Jext which are particular brand names.

General Aspects (pupils)

The School will establish clear procedures and responsibilities to be followed by staff in meeting the needs of pupils with additional medical needs. This process includes:

- Receipt of Health Care Plans from the School Nurse
- The Medical Leads checking this HCP on an annual basis, in consultation with parents, and ensuring it is signed off as being current and appropriate
- Effective communication of the individual Care Plans to all relevant staff.

- Ensuring staff first aid training includes anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency.

General Aspects (Staff, Members of the Public and other Visitors)

Due to the diverse nature of the School, it is important that allergen information is accessible to all parties who visit the site.

Responsibilities

Medical information for pupils is private and confidential. However, it is the responsibility of staff in the office to pass any information onto the Catering Manager with regards to food allergies of pupils. Staff will be made aware of these pupils via:

- Staff training and instruction in the Kitchen.
- A list will be sent out to all relevant staff at the start of the year detailing those pupils with medical conditions and appropriate lanyards are provided that children MUST wear when visiting the Kitchen/Dining Hall.
- If a new child joins the school at any point after the beginning of the academic year and food allergies are reported, this information will be shared with the Catering Manager.
- It is the responsibility of class based staff to ensure that when children leave the classroom for lunch that they are wearing their lanyard. This is also checked by Welfare staff and kitchen staff will always check/read the lanyard.
- It is the responsibility of Welfare Assistants to ensure that lanyards are collected after lunch
- The office staff will run a monthly report to check for any changes regarding food allergies and send this to the Medical Leads for her to update medical registers and cross reference lists with the kitchen.
- The Medical Leads will update class based staff on a monthly basis of any changes to medical needs.
- Class based staff will undertake a half termly check of lanyards and request replacements from the office if required

Parents and pupils are responsible for ensuring that they have their medication with them at school at all times, if this is reflected in their HCP. The Medical Leads checks medication on a monthly basis. EPI Pens/Inhalers are stored, as per all medicines and in line with school policy.

The Kitchen Staff are also responsible for:

- Using only authorised suppliers and being the controlling point and contact for all purchases of food stuffs for School catering.
- Ensuring suppliers of all foods and catering suppliers are aware of the School's food allergy policy and the requirements under the labelling law.
- Ensuring suppliers of food stuffs are nut free or labelled 'may contain nuts'.
- Being aware of pupils and staff who have such food allergies. Clear labelling of items of food stuffs that may contain nuts.

Educational Visits, Events (for example packed lunches)

All staff must check the requirements of all pupils they are taking off site. This is part of the offsite risk assessment. All pupils' information is on SIMS. Where food intolerance has been identified, this must be relayed to the Catering team if they are ordering and/or preparing packed lunches/refreshments/food.

All staff undertaking an offsite trip must:

- Physically check that pupils have their medication before leaving site.
- Ensure that all food collected from the Kitchen has been clearly labelled and they are aware of any foods that should not be given to pupils (also any foods that pupils may purchase outside of the School during the trip).
- Take copies of HCPs for those children that have one.

Appendix A

School Management of severe allergies (ANAPHYLAXIS)

All staff must make themselves aware of the School First Aid Policy. This outlines Anaphylaxis and the recognition and treatment that should be followed. Below is the extract from the School First Aid Policy.

Anaphylaxis is a severe and potentially life-threatening allergic reaction at the extreme end of the allergic spectrum. Anaphylaxis may occur within minutes of exposure to the allergen, although sometimes it can take hours. It can be life-threatening if not treated quickly with adrenaline.

Any allergic reaction, including anaphylaxis, occurs because the body's immune system reacts inappropriately in response to the presence of a substance that it perceives as a threat. Anaphylaxis can be accompanied by shock (known as anaphylactic shock): this is the most extreme form of an allergic reaction.

Common triggers of anaphylaxis include:

- Peanuts and tree nuts – peanut allergy and tree nut allergy frequently cause severe reactions and for that reason have received widespread publicity
- Other foods (e.g. dairy products, egg, fish, shellfish and soya)
- Insect stings (bees, wasps, hornets)
- Latex (gloves and PPE)
- Drugs (illegal and prescription)

Anaphylaxis has a whole range of symptoms. Any of the following may be present, although most people with anaphylaxis would not necessarily experience all of these:

- Generalised flushing of the skin anywhere on the body
- Nettle rash (hives) anywhere on the body
- Difficulty in swallowing or speaking
- Swelling of tongue/throat and mouth
- Alterations in heart rate
- Severe asthma symptoms
- Abdominal pain, nausea and vomiting
- Sense of impending doom
- Sudden feeling of weakness (due to a drop in blood pressure)
- Collapse and unconsciousness



When symptoms are those of anaphylactic shock the position of the pupil is very important because anaphylactic shock involves a fall in blood pressure.

- If the patient is feeling faint or weak, looking pale, or beginning to go floppy, lay them down with their legs raised. **They should not stand up.**
- If there are also signs of vomiting, lay them on their side to avoid choking (recovery position).
- If they are having difficulty breathing caused by asthma symptoms and/or by swelling of the airways, they are likely to feel more comfortable sitting up. **Action to take:**

(Ask other staff to assist, particularly with making phone calls, one person must take charge and ensure that the following is undertaken)

- Ring (9) 999 immediately to get the ambulance on the way.
- Ring the Medical Centre (MC) – state what has happened so that they can assess the situation and bring medication to the location. Please note that the MC staff may not be able to attend immediately, and there should be no delay in using the person's medication. Locate the nearest first aider to come and assist.
- Use the person's adrenaline device*, or the one located in the Catering Department or within their House.
- Ensure that the Security Cabin is aware that an ambulance is coming onto site.
- Stay in the immediate area to assist the MC staff and/or direct the Emergency Services
- Ensure that accident forms are filled out if applicable.

*Staff should update their training to use the adrenaline device every 3 years as a minimum. This will be delivered as part of first aid training, and by staff attending training delivered by the Medical Centre team.