

SILVER BIRCH ACADEMY TRUST

Policy for Managing Nut and Other Allergies



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Introduction

This policy should be read in conjunction with the School's First Aid and Medication policies. ANAPHYLAXIS is a severe allergic reaction at the extreme end of the allergic spectrum, affecting the entire body, and can occur within minutes of exposure. The main causes are attributed to nuts, seeds and seafood. This policy focuses on the management of nut and other allergies.

One approach could be to ban nuts from the school; however, the Anaphylaxis Campaign highlights a number of problems with this approach as follows:

- It would be impossible to provide an absolute guarantee that the school is nut free, given that pupils regularly bring in food from home and food items bought on the way to School
- There would be a risk that children with allergies might be led into a false sense of security
- The nut ban would be seen as a precedent for demands to ban other potentially 'risky' foods.

There is a strong case to be argued that children with food allergies will develop a better awareness and understanding of how to manage their allergies if they grow up in an environment where allergens are regularly present.

The school has taken steps to avoid the use of nuts (tree nuts, peanuts and pine nuts) and nut related products in our catering services, recognising the potentially severe allergic reaction, for some people.

We also avoid the use of sesame seeds and sesame related products.

We do not claim to be a 'nut-free' school. The Anaphylaxis Campaign advises that these foods are restricted and monitored, as much as is reasonably possible.

Within the school's catering facilities, we take precautions to minimise the risk of anaphylaxis and other allergenic reactions occurring:

The catering service never knowingly uses any nuts (including pine nuts and peanuts) or sesame seeds and associated nut/sesame products in our kitchens.

Pupils who are known to have food allergies (eg nuts, egg, milk, gluten, fish, molluscs, crustaceans) are encouraged to seek guidance from catering staff – on a daily basis, if necessary – on what they can have, from the menu, for lunch.

Catering staff receive regular updates in respect of pupils with food allergies

Whilst most allergic reactions are the result of food ingestion, we recognise, too, that severe allergic reactions can occur as a result of individuals being susceptible to airborne allergens. Allergic reactions can also be triggered by touching surfaces – such as computer or piano keyboards which may have been inadvertently contaminated.

The success of minimising anaphylaxis risk – and all other allergenic reactions - requires the cooperation of pupils, staff and parents. Parents are asked not to provide pupils with snacks and cakes (birthdays are potentially high-risk occasions) that contain nuts and sesame seeds. Our midday supervisors and assistants are vigilant in their checks at lunchtime to ensure that pupils do not bring the wrong foods into school.

It is essential that the school has full details of all pupils' allergies. This information is requested by the school, and must be provided by parents when their child joins the school and then updated by parents if allergies are discovered at a later stage.

The SENCo will provide a medical plan and an Epi-pen will be clearly marked with the child's name.

In some cases, the SENCo and / or teacher will liaise directly with parents on a regular or occasional basis.

Within the parameters of confidentiality, the school provides – to the catering department and other relevant parties – a list of names and photographs of pupils with severe medical conditions including severe allergies.

When the school provides packed lunches for trips away, catering staff are provided with a list of children who have allergies and specially labelled packed lunches are provided, accordingly.

When pupils take part in single or multi-day school trips, participating pupils' allergies, their respective treatments and other associated requirements are factored into the planning process.

Whilst the school will exercise all due care and attention to minimise risk, older pupils are expected to self-manage their allergy where possible, too, having an understanding of;

- Foods which are safe or unsafe
- Avoiding eating any foods with unknown ingredients
- Their specific symptoms, if an allergic reaction occurs
- Who to advise, if and when an allergic reaction happens
- Letting friends and staff know about their allergy, in case of emergency

Anaphylaxis protocol

How do I recognise an anaphylaxis reaction and what action should I take?

Early symptoms include:

- Itchy, urticarial rash anywhere on the body
- Runny nose and watery eyes
- Nausea and vomiting
- Dizziness

Danger signs include:

- Swelling of the lips, tongue and throat
- Cough, wheeze, tightness of chest or shortness of breath
- Sudden collapse or unconsciousness

Treatment will depend on the severity of the reaction. For mild symptoms prescribed Piriton or inhaler may be used by the child according to our school's medication policy. The agreed health plan will be in a named medical box stored in the medical centre or taken away on the trip.

For severe symptoms (see Emergency procedure, below) an Epi-Pen device should be used. This should be administered by a trained first aider into the pupil's thigh muscle (can be delivered through clothing) and will allow the adrenaline to quickly reverse the effects of the allergic reaction. The child should then be taken to hospital

Emergency procedure

The following procedure must be adopted;

- If two adults are not present, the member of staff attending the child will blow their whistle for assistance
- The person assisting will be asked to call an ambulance and fetch the child's emergency box if it is not in the location where the child has fallen ill.
- The person assisting will also ensure that there is an Epi-Pen trained first aider to attend to the child

- The child's condition should be monitored carefully
- The Epi-Pen trained first-aider will administer the Epi-Pen
- The area where the Epi-Pen is applied should be massaged for 10 seconds
- The progress of the child will continue to be monitored as a second dose of Epi-Pen may be required after 10 minutes - if the condition has not improved and the ambulance has not arrived
- When the ambulance crew arrives, staff involved will ascertain where they will be taking the child and give all used Epi-Pens to the ambulance crew for safe disposal
- During this time, the child's parents, guardian or next of kin is to be contacted and advised to attend the school. if they are not in the immediate vicinity they will be asked to proceed to the hospital
- The child is to be accompanied to the hospital by a member of staff if parents have not arrived

